

*Hartford HealthCare Tallwood Urology and Kidney Institute*

# Outcomes Report 2018



# Hartford HealthCare Tallwood Urology and Kidney Institute 2018 Outcomes Report

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# Hartford HealthCare Tallwood Urology and Kidney Institute 2018 Outcomes Report

WELCOME

## A word from our leadership



Thank you for your interest in the Hartford HealthCare Tallwood Urology and Kidney Institute, a destination for patients and families across Southern New England for diagnosis and treatment of a range of illnesses from urological and bladder cancer to kidney stones and incontinence.

Hartford HealthCare's core values are: integrity, caring, excellence and safety. Our people live these values every day. This Outcomes Report highlights exactly how these values translate to better and more compassionate care within the Tallwood Urology and Kidney Institute. Our medical institutes — such as Tallwood — are unique in the United States. They bring together a diverse group of providers across our entire system to set and adhere to the highest standards of care, to make the best use of advanced clinical technology and to provide a meaningful and satisfying patient experience.



Hartford HealthCare is committed to sharing its clinical outcomes, and these speak for themselves. You will see better-than-expected complications rates for bladder cancer kidney cancer, prostate cancer, kidney stone procedures and benign prostate enlargement. When asked their experiences with Tallwood physicians, 95 percent of our patients give them top marks. You'll also read the stories of many patients whose lives have been healed and helped at Tallwood.

For patients and families dealing with these serious diagnoses, the Tallwood Urology and Kidney Institute stands ready to provide expert care attuned to the needs of patients and their families.

Sincerely,

Elliot Joseph  
Chief Executive Officer

Jeffrey Flaks  
President  
Chief Operating Officer

Rocco Orlando III, MD  
Senior Vice President  
Chief Medical Officer



# Hartford HealthCare Tallwood Urology and Kidney Institute

## 2018 Outcomes Report

### WELCOME

## About Hartford HealthCare

Hartford HealthCare is Connecticut's most comprehensive healthcare network. Our fully integrated health system includes a tertiary-care teaching hospital, an acute-care community teaching hospital, an acute-care hospital and trauma center, two community hospitals, the state's most extensive behavioral health services network, a large primary care physician practice group, a regional home care system, an array of senior care services, and a large physical therapy rehabilitation network. The Hartford HealthCare Cancer Institute provides coordinated care across five cancer centers and is the charter member of the Memorial Sloan Kettering Cancer Alliance.

Today, Hartford HealthCare is creating a better future for healthcare in Connecticut and beyond. We are a community of caregivers engaged in developing a coordinated, consistent high standard of care. We use research and education as partners in care delivery. We create and engage in meaningful alliances to enhance access to services. We invest in technology and training to develop new pathways to improve the timeliness, efficiency and accuracy of our services.

### Our vision

To be nationally respected for excellence in patient care and most trusted for personalized coordinated care.

### Our values

#### **Caring:** *We do the kind thing.*

Every Hartford HealthCare staff member touches the lives of the patients and families in our care. We treat those we serve and each other with kindness and compassion and strive to better understand and respond to the needs of a diverse community.

#### **Safety:** *We do the safe thing.*

Patients and families have placed their lives and health in our hands. At Hartford HealthCare, our first priority — and the rule of medicine — is to protect them from harm. We believe that maintaining the highest safety standards is critical to delivering high-quality care and that a safe workplace protects us all.

#### **Excellence:** *We do the best thing.*

In Hartford HealthCare, only the best will do. We work as a team to bring excellence, advanced technology and best practices to bear in providing the highest-quality care for our patients and families. We devote ourselves to continuous improvement, excellence, professionalism and innovation in our work.

#### **Integrity:** *We do the right thing.*

Our actions tell the world what Hartford HealthCare is and what we stand for. We act ethically and responsibly in everything we do and hold ourselves accountable for our behavior. We bring respect, openness and honesty to our encounters with patients, families and coworkers and support the well-being of the communities we serve.

## Tallwood Urology and Kidney Institute vision

To provide excellence in clinical outcomes, research and the patient experience while being a national leader for comprehensive state of the art urologic and kidney care.

Visit us at [www.hartfordhealthcare.org](http://www.hartfordhealthcare.org)

# Hartford HealthCare Tallwood Urology and Kidney Institute 2018 Outcomes Report

## LEADERSHIP

### Steven J. Shichman, MD | Physician-In-Chief, Hartford HealthCare Tallwood Urology and Kidney Institute



A board-certified urologist, Dr. Shichman specializes in robotic surgery, renal cancer and adrenal disorders. Following his education and work experience as a chemical engineer, Dr. Shichman earned his medical degree from the University of Connecticut School of Medicine in 1986. He completed his General Surgery and Urology training at the University of Connecticut as well. He also completed a fellowship in Laparoscopy and Minimally-Invasive Surgery at New York Hospital and Cornell Medical Center. Dr. Shichman serves as an associate clinical professor at the UConn School of Medicine.

Dr. Shichman is a pioneer in urologic minimally-invasive surgery and is recognized nationally and internationally as a leader in the field. He is among the country's most experienced surgeons in laparoscopic adrenalectomy, laparoscopic and hand-assisted laparoscopic nephrectomy and robotic partial nephrectomy. As a course director for the American Urological Association postgraduate courses from 1999-2013. He has taught laparoscopic techniques to more than 1,200 urologists from around the world. Dr. Shichman has been recognized as one of Connecticut's top doctors in urology by *Connecticut Magazine* and *Hartford Magazine*. Over the past 20 years, Dr. Shichman has helped develop the Hartford Hospital's Department of Urology's nationally- and internationally-recognized reputation for innovation in laparoscopic and robotic surgery. His department has hosted numerous post-graduate courses in minimally-invasive surgery, including national symposiums on robotic urologic surgery.

Dr. Shichman is also the executive director of Hartford Hospital's Center for Education, Simulation and Innovation (CESI), one of the country's largest and most comprehensive medical simulation training centers.

Dr. Shichman has been affiliated with Hartford Hospital (and subsequently Hartford HealthCare) since 1993. He sees patients at Hartford Hospital as well as Hartford HealthCare Medical Group (HHC MG) offices in Hartford and Avon.

# Hartford HealthCare Tallwood Urology and Kidney Institute 2018 Outcomes Report

## LEADERSHIP

### **Jan Ruderman** | *Vice President, Hartford HealthCare Tallwood Urology and Kidney Institute*



In her role as vice president of Hartford HealthCare's Tallwood Urology and Kidney Institute, Ms. Ruderman partners with physician leaders to identify and address opportunities to improve the quality of care provided to Tallwood patients. She does this by co-leading disease management teams, which focus on the delivery of evidence-based medicine, patient education, community education and process improvement.

She has been with Hartford HealthCare for 20 years, in a variety of leadership roles in operations and quality/process improvement. They include director of rehabilitation for HHC at Home, vice president of quality for the Rehabilitation Network and business architect for the design of the Institute Model that has been deployed throughout the system.

Jan has a master's degree in business administration, with a focus on healthcare, and a bachelor's degree from Tufts University. She is also trained in Lean management.

# Hartford HealthCare Tallwood Urology and Kidney Institute 2018 Outcomes Report

## THE TALLWOOD UROLOGY AND KIDNEY INSTITUTE

### An approach unlike any other in Connecticut



The Hartford HealthCare Tallwood Urology and Kidney Institute has fellowship-trained physicians who cover six specialty areas including general urology, men's health (fertility/andrology, men's sexual function), pelvic health and incontinence, kidney stones and urologic cancer along with a wide range of conditions and treatments. Tallwood nephrologists specialize in management of kidney disease and can be the link in coordination of care for kidney transplant patients.

Tallwood's urologists and urogynecologists are recognized as regional and national leaders in their fields. Many have pioneered treatments that have become the gold standard of care nationwide.

All of this comes within the framework of an innovative, coordinated disease management team model that ensures the highest-quality, safest and most cohesive care.

Our innovative institute approach is unlike any other in the state and is among the most highly regarded in the nation. Through our Institute, which is organized around specific diseases and not necessarily locations, we can apply best practices across our system so patients receive the same high standards of care no matter where they live or which Hartford HealthCare facility they choose.

Tallwood's urology oncology team is also part of the Hartford HealthCare Cancer Institute, the charter member of the Memorial Sloan Kettering Cancer Alliance. This gives our urologic cancer patients access to state-of-the-art clinical trials closer to home.



# Hartford HealthCare Tallwood Urology and Kidney Institute 2018 Outcomes Report

## PATIENT EXPERIENCE

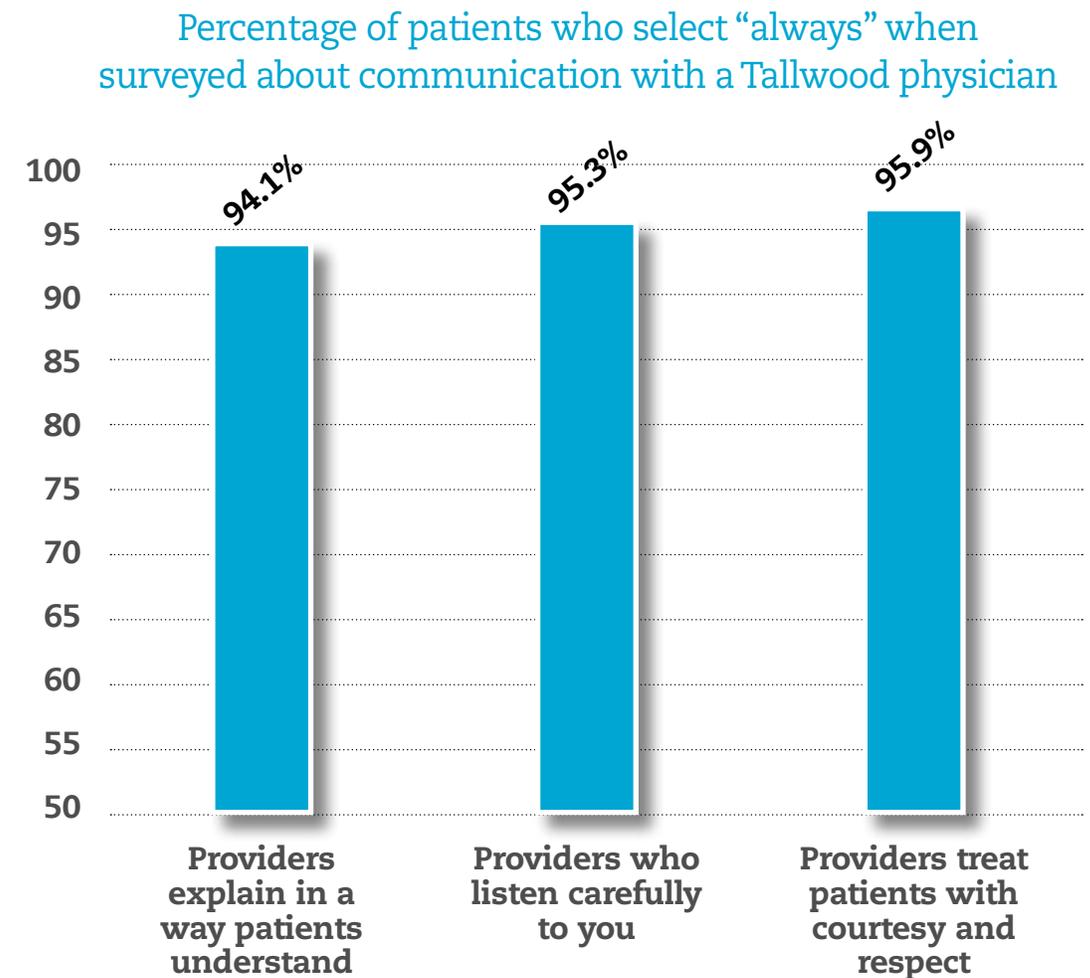
### Effective communication puts patients at ease

The Hartford HealthCare Tallwood Urology and Kidney Institute is dedicated to providing patients with exceptional, coordinated care and a single, high standard of service.

As a recognized clinical leader with demonstrated respect for our patients, the Tallwood team is committed to effective communication with patients and their families because we know patients who are actively engaged in their care have better outcomes.

Our providers and patient navigator tune into the physical and emotional needs of the patients through open discussion and direction. We provide hope in times of frustration and discouragement by solving the most complex of cases.

When patients visit a Tallwood physician's office, they can expect to be heard, to be communicated to in a way they can understand and to



be treated with courtesy and respect. Our communication survey results demonstrate this commitment to the patient experience.

 HHC Tallwood

Source: Press Ganey

## STATISTICAL HIGHLIGHTS

### Volume statistics



Being a leader in urologic health means patients seek us out for their care.

Each year, more patients are choosing Tallwood for their urological and kidney needs. The Hartford HealthCare Tallwood Urology and Kidney Institute treated 12,204 patients in an acute care setting (inpatient, observation and ambulatory surgery) in FY17 and saw high volume in each of our subspecialties.

**4,599**

general urology  
patients

**2,932**

patients with  
chronic kidney  
disease

**1,908**

patients with  
kidney stones

**1,841**

patients with  
a pelvic  
reconstructive  
surgery (urinary  
incontinence)

**1,633**

patients with  
urologic cancer

**848**

men's health  
patients

# Hartford HealthCare Tallwood Urology and Kidney Institute 2018 Outcomes Report

## STATISTICAL HIGHLIGHTS

### Volume statistics

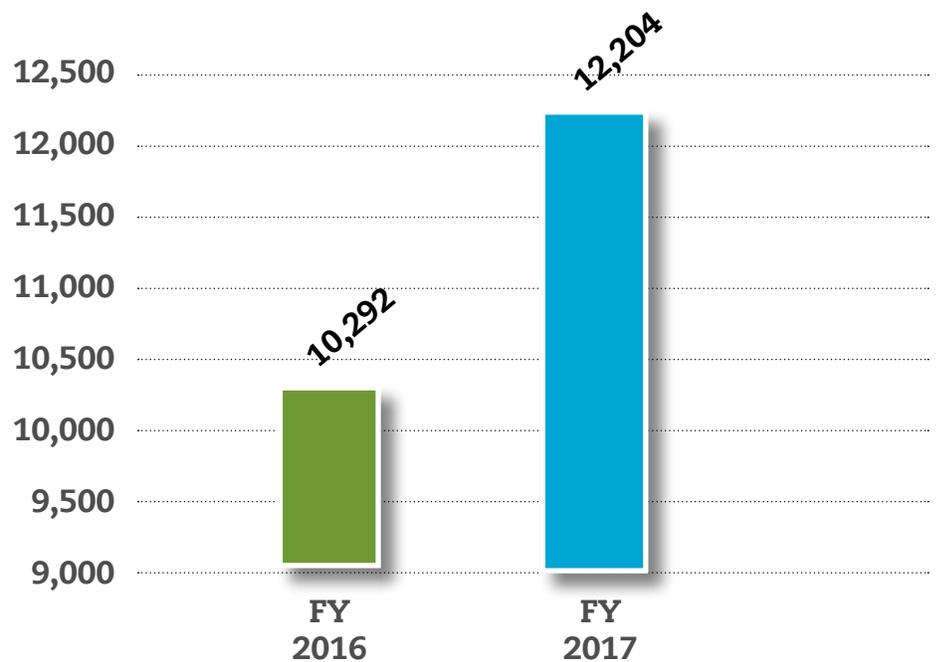
The Hartford HealthCare Tallwood Urology and Kidney Institute is the market leader in Connecticut for:

- Overall urology and kidney disease
- General urology
- Urologic cancer (prostate, bladder, kidney and adrenal cancers)
- Pelvic health and incontinence

Tallwood's patient volume has increased in such subspecialty areas as general urology, urological cancer, kidney stones, men's health, chronic kidney disease and pelvic health (urinary incontinence).

Our physicians' experience in complex and routine procedures means better outcomes for patients. Research shows that increased patient volume correlates to lower complication and operative mortality rates.

### Overall Tallwood Patient Volume



Source: ChimeData

## OUTCOMES REPORT

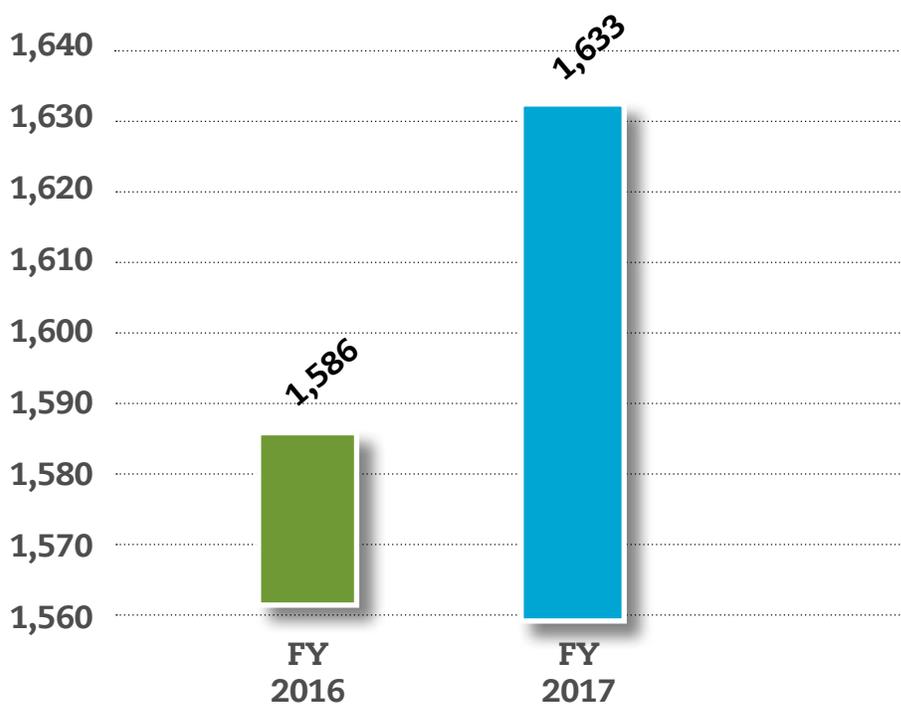
### Urologic oncology

The Hartford HealthCare Tallwood Urology and Kidney Institute, in conjunction with the Hartford HealthCare Cancer Institute, is a tertiary referral center for Connecticut and New England. Our team of fellowship-trained urologists, nephrologists and oncologists care for the most complex cancer cases.

Our multidisciplinary urologic oncology disease management team meets regularly for discussions on evidence-based medicine. In addition, the team holds case conferences for decisions on patient-specific treatments and planning with experts from across the system and Memorial Sloan Kettering (MSK). Our MSK partnership provides patients with access to state-of-the-art clinical trials closer to home.

Because of this, we are the market leaders in Connecticut for treating urologic cancers including prostate, kidney and bladder cancers. From FY 2016 to FY 2017, our urologic cancer volume grew by approximately 3 percent.

### Urologic Cancer Patient Volume



Source: ChimeData

# Hartford HealthCare Tallwood Urology and Kidney Institute 2018 Outcomes Report

## OUTCOMES REPORT

### Prostate cancer

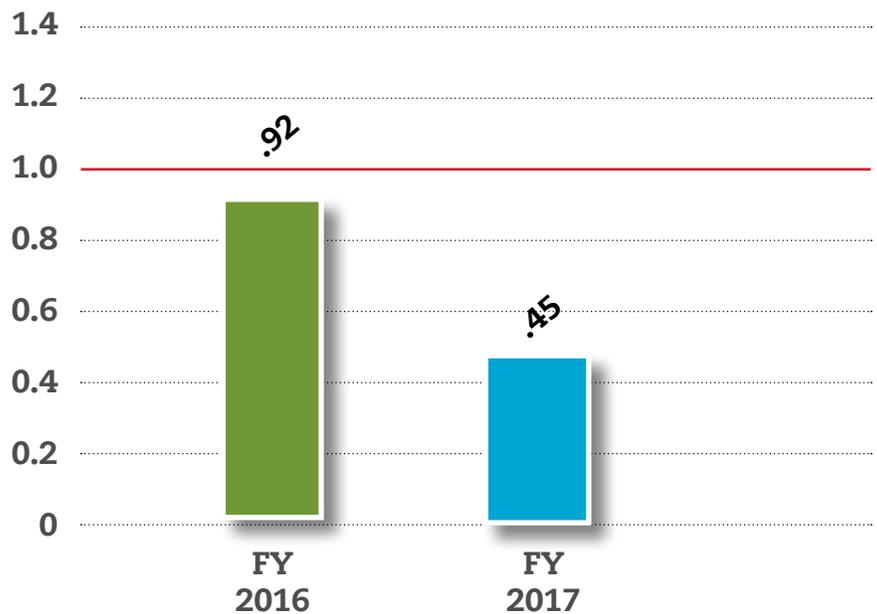
Most men do not know they have prostate cancer until it is found during a medical exam. According to the National Institutes of Health, there are approximately one million prostate biopsies done in the United States every year, with 240,000 men being told they have prostate cancer. Because current traditional biopsy techniques don't involve full "sight," meaning there is some uncertainty as to exactly what tissue is being extracted, 23 percent of men with a negative biopsy actually have cancer.

The Tallwood Institute team utilizes state-of-the-art equipment to make a precise diagnosis. Our physicians use specialized MRI and ultrasound fusion equipment that can more accurately take biopsies of suspected prostate cancer and identify disease progression. The equipment merges ultrasound with MRI to create a three-dimensional image so they can see the entire biopsy area. For patients under active surveillance — where prostate cancer is being monitored but not yet treated — this equipment helps doctors make confident treatment decisions.

There are many treatment options available for men with prostate cancer including active surveillance, radiation and surgery. Hartford HealthCare has

considerably lower complication rates for patients with prostate cancer who undergo surgical treatment than what would be expected for this population.

Prostate Cancer Complication Rate  
(**<1 is better than expected**)



Inpatient Discharges Source: Premier

## OUTCOMES REPORT

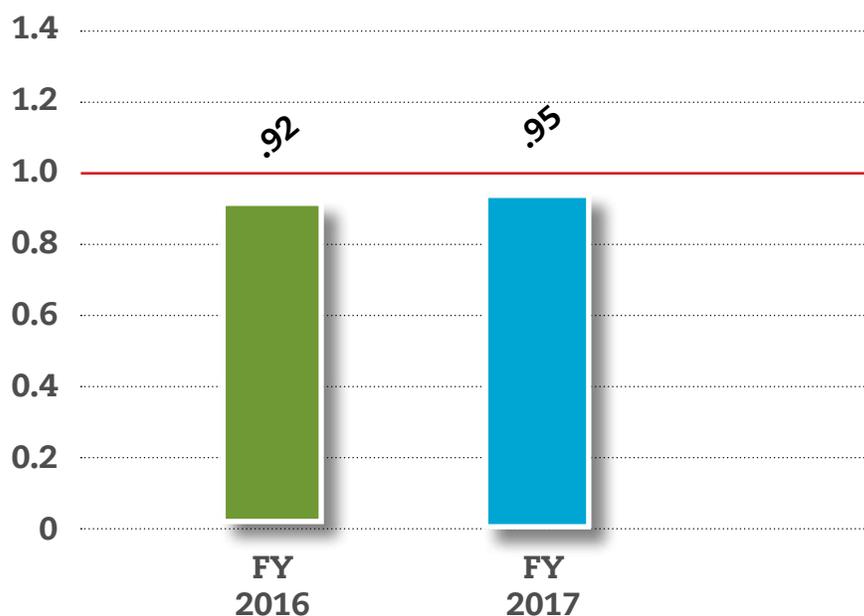
### Kidney cancer

Because of our expertise, we see the highest volume of cases statewide for a number of conditions, including kidney cancer. With improved imaging allowing earlier detection, the number of renal tumors being diagnosed is rising. Surgery is the only way to cure kidney cancer. Recent advances in surgical techniques frequently allow surgeons to remove only the tumor from the kidney in what is called partial nephrectomy or nephron-sparing surgery (NSS).

Our surgeons are among the world's most experienced in NSS, including robotic partial nephrectomies. In fact, our urologic surgeons were instrumental in developing and teaching many of the minimally-invasive techniques now used for kidney surgery in the United States and overseas. Our surgical teams routinely remove even the more complex and larger tumors using minimally-invasive approaches, which offer reduced morbidity, shorter hospital stays and more rapid return to baseline activities.

NSS allows preservation of the affected kidney without compromising cancer cure rates. Preserving kidney function dramatically improves the patient's overall health and well-being, and reduces the incidence of chronic kidney disease.

**Kidney Cancer Complication Rate**  
(**<1 is better than expected**)



*Inpatient Discharges Source: Premier*

# Hartford HealthCare Tallwood Urology and Kidney Institute 2018 Outcomes Report

## OUTCOMES REPORT

### Bladder cancer

Our urologic cancer specialists provide a variety of advanced treatment options for bladder cancer including intravesical therapy, robotic surgery, reconstructive surgery expertise and integrative treatments.

As a regional leader in cancer research, our specialists participate in studies to advance targeted therapies, gene therapy and photodynamic therapies being developed to treat bladder cancer.

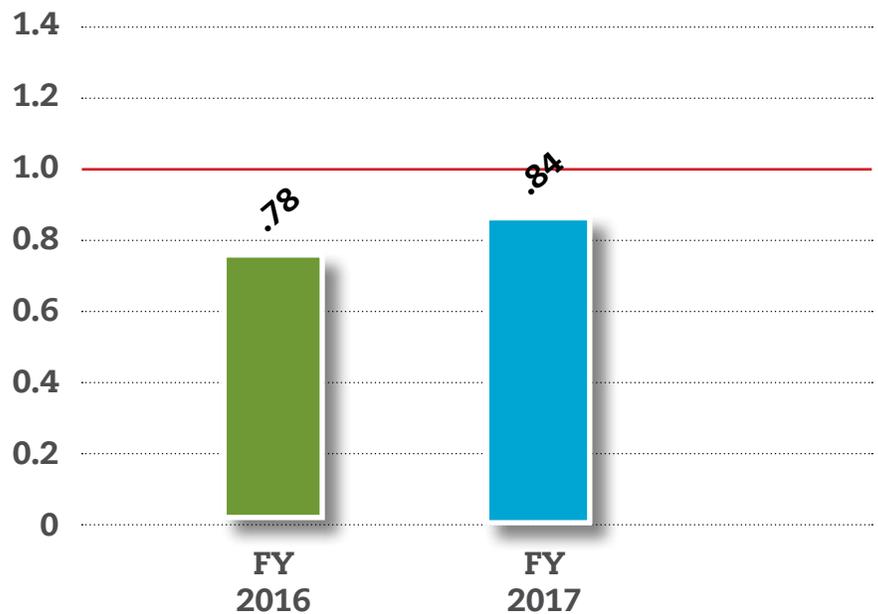
The great work that has been accomplished to lower complication rates across Hartford HealthCare by the Tallwood Urology and Kidney Institute bladder cancer team is evidenced by the fact that complications from bladder cancer surgery have consistently remained better than expected.

In the framework of the Hartford HealthCare Cancer Institute's disease management model, the disease team has worked to create an effective strategy to reduce complications for patients who undergo a cystectomy.

These high-risk patients are vulnerable to infection, failure to thrive, blood clots and gastrointestinal complica-

tions. Because of our team approach and state-of-the-art care, our complication rates are lower than expected for this population.

### Bladder Cancer Complication Rate (<1 is better than expected)



Inpatient Discharges Source: Premier

## OUTCOMES REPORT

### Robotic surgery

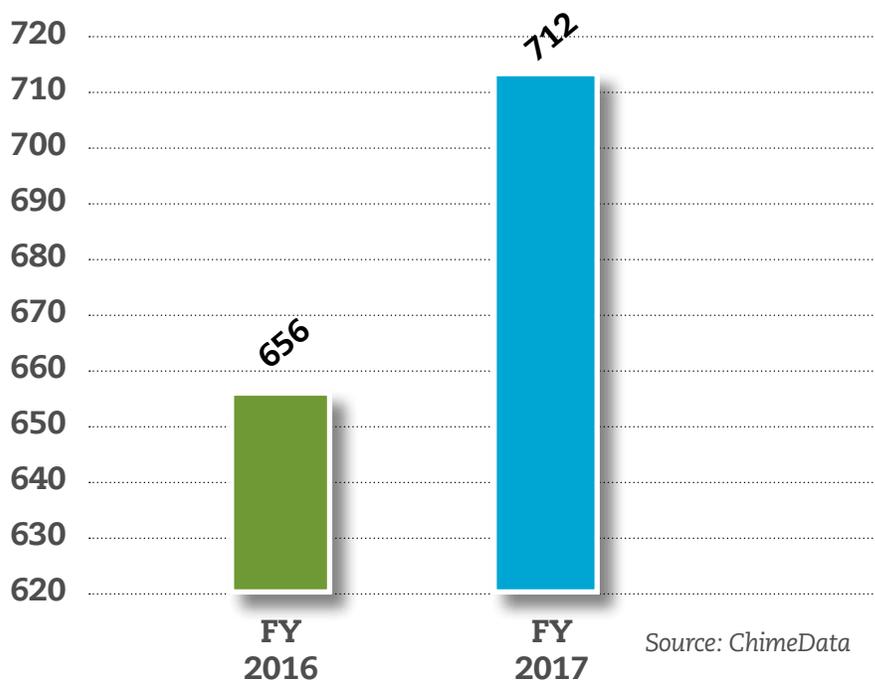
The Hartford HealthCare Tallwood Urology and Kidney Institute is a national leader in robotic urologic surgery. The urologic robotic surgery program, led by Dr. Joseph Wagner, includes eight active robots and two training robots.

This technology, coupled with the expertise and experience of the Institute's urologists and urogynecologists, has resulted in complication rates that are consistently well below expected complication rates. Tallwood's progressive robotic surgery team is one of the most experienced in the world and routinely uses the technology to treat prostate, kidney and bladder cancer patients. The team has led the way in lymph node dissections and recently broadcast a live surgery to the Memorial Sloan Kettering Alliance.

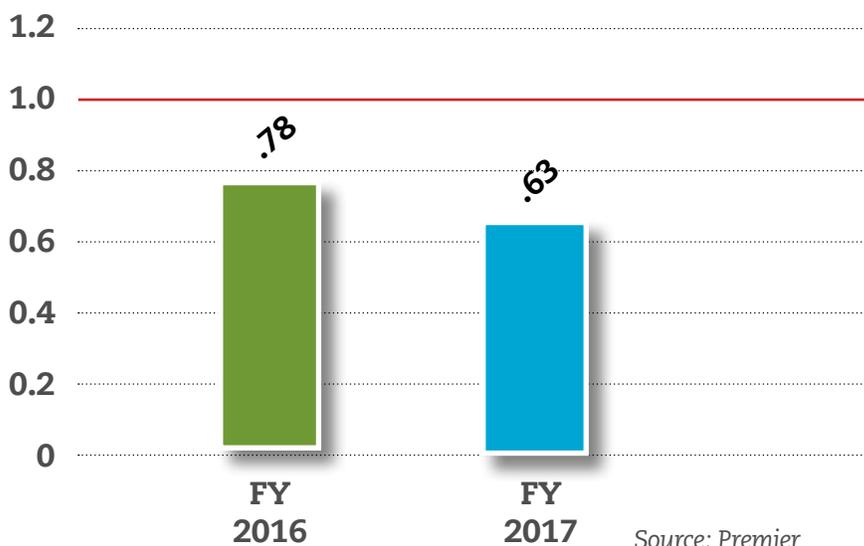
Robotic surgical systems have a three-dimensional, high-definition vision system that provides a highly magnified, close-up view of the surgical area. Special instruments and computer software give surgeons enhanced vision, precision, dexterity and control. These features allow the surgeons to perform precise, minimally-invasive procedures that would be extremely difficult with standard laparoscopic techniques.

Compared to open surgery, many studies have shown that patients undergoing robotic surgery have less bleeding, fewer blood transfusions, less need for narcotic pain medication, less scarring and faster recovery times.

### Robotic Urologic Surgery Patient Volume



### Robotics by Tallwood Surgeons Complication Rate (<1 is better than expected)



# Hartford HealthCare Tallwood Urology and Kidney Institute 2018 Outcomes Report

## OUTCOMES REPORT

### Kidney stones

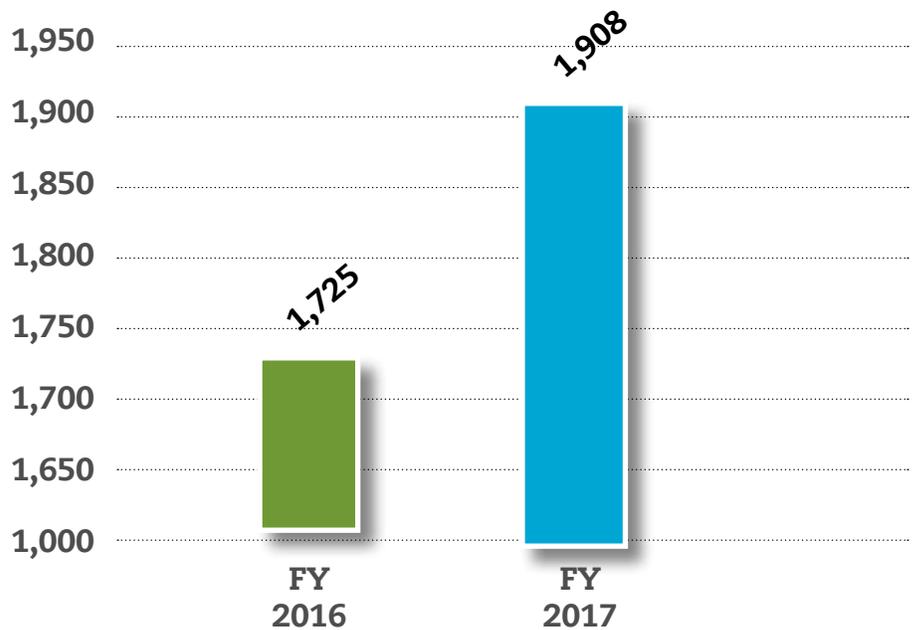
The incidence of kidney stones is on the rise, which makes it important to know how they form and how to avoid them.

Kidney stones are hard deposits of crystalized salt and minerals that form in the kidney. More common in men than women, most are made of calcium, although some can be composed of other substances such as cysteine, struvite or uric acid. When urine contains more crystal-forming substances than fluids, salt and minerals can coalesce and form stones.

Different types of kidney stones may be caused by different possible sources. Sometimes, kidney stones can be caused by medications, chronic disease, obesity or previous surgeries. Family history and dehydration can also put you at risk.

Kidney stones can be very painful and cause medical problems when they move outside the kidney and obstruct the ureter, the tube that carries urine from the kidneys to the bladder. While many kidney stones will pass on their own, occasionally they will need to be treated to alleviate pain and prevent kidney injury.

#### Kidney Stones Patient Volume



Source: ChimeData

## OUTCOMES REPORT

### Kidney stones / Percutaneous nephrolithotomy

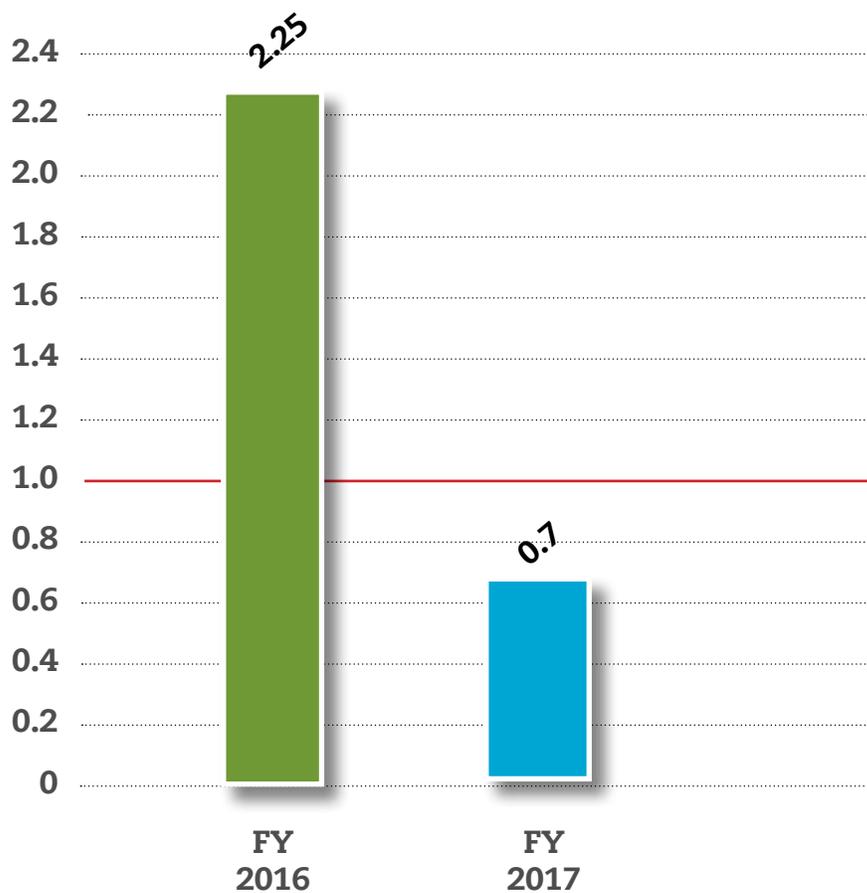
Treatment options for kidney stones depend on factors such as the size, hardness and location of the stone. The Hartford HealthCare Tallwood Urology and Kidney Institute offers a variety of treatment options for kidney stones including medical expulsive therapy, extracorporeal shockwave lithotripsy (ESWL), ureteroscopic stone removal and percutaneous nephrolithotomy (PCNL).

In cases of larger kidney stones, our surgeons are experienced in performing PCNLs, a minimally-invasive procedure which requires less recovery time than open surgical approaches.

Patients with kidney stones are at an increased risk of developing more. To help mitigate this risk, the interdisciplinary treatment team of urologists, nephrologists, emergency providers and radiologists are dedicated to preventing the development of future stones by using medication and dietary modifications.

The hard work of our team in reducing complications can be seen in our FY17 low complication rate.

**PCNL Complication Rate**  
**Inpatient (observed/expected rate)**  
**(<1 is better than expected)**



Inpatient Discharges Source: Premier

# Hartford HealthCare Tallwood Urology and Kidney Institute 2018 Outcomes Report

## OUTCOMES REPORT

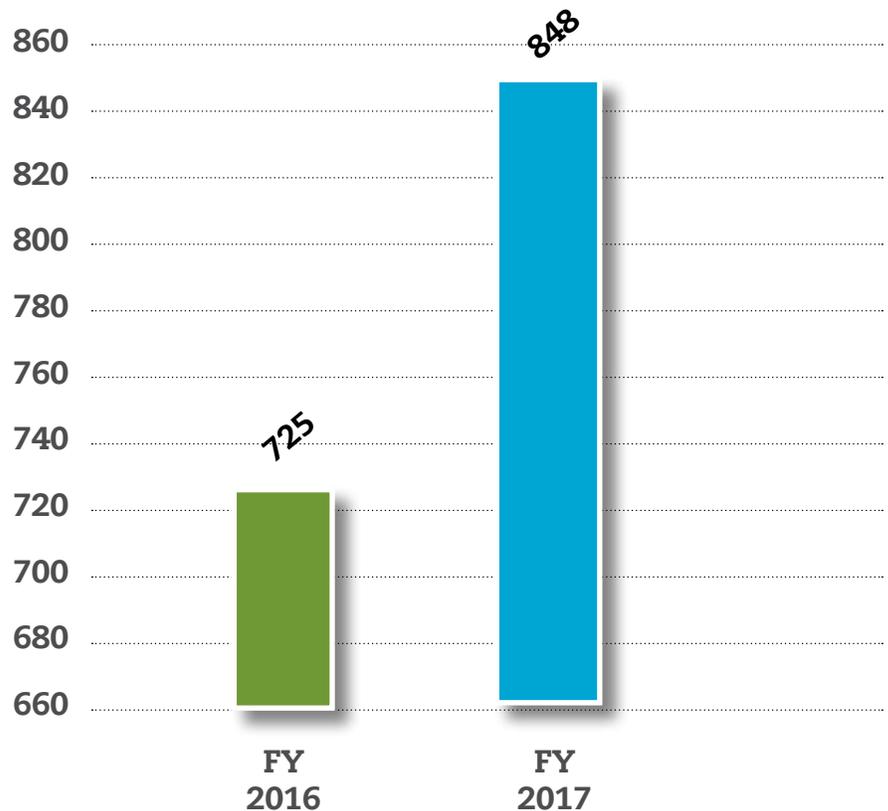
### Men's health

Consistent with Hartford HealthCare's mission to improve the health of our communities, the Tallwood Urology and Kidney Institute team recognized the need to provide improved care for men. According to current national statistics, men are nearly 1.4 times as likely as women to die from almost every chronic medical condition. In addition, men use preventative healthcare less and are more prone to engage in such risky behaviors as smoking and alcohol and illicit drug use. As a result, American men live five years less than women on average.

The paradigm needs to shift in order to address these disheartening statistics. The Tallwood Men's Health program was created with this in mind to provide leading-edge, multidisciplinary care to men in a comfortable and accessible way. We have partnered with other Hartford HealthCare specialists and community providers who understand male-specific disease processes and believe that, with the aid of a men's health checklist and a dedicated nurse coordinator, we can improve male-specific preventative health screening and make more effective and expeditious referrals when needed.

We believe Connecticut men deserve to be provided with the highest level of care and the Tallwood Urology and Kidney Institute is committed to making sure that happens.

### Men's Health Patient Volume



Source: ChimeData

## OUTCOMES REPORT

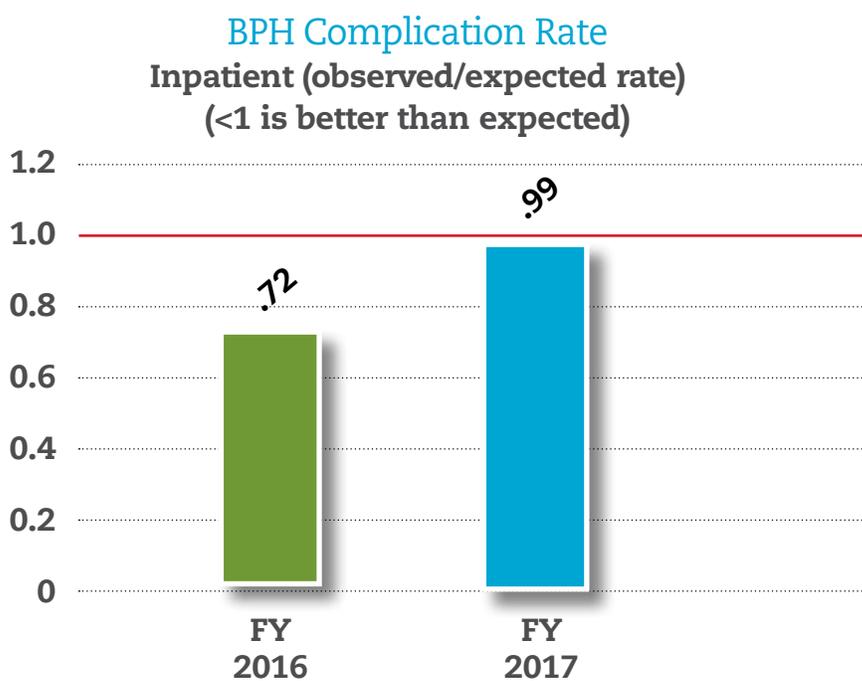
### Men's health / benign prostatic hyperplasia (BPH)

One common condition being addressed by our Men's Health team at the Hartford HealthCare Tallwood Urology and Kidney Institute is benign prostatic hyperplasia (BPH). By age 60, about 25 percent of men have troublesome voiding symptoms, a percentage that only further increases with age. Patients who do not see enough benefit from medication may consider a spectrum of bladder outlet procedures including UroLift, laser prostate vaporization (either GreenLight or holmium laser), transurethral resection of the prostate (TURP), simple prostatectomy or prostate artery embolization. While TURP is classically considered the gold standard, Tallwood urologists tailor these advanced techniques to best fit each man's unique anatomy, symptoms and goals.

The majority of BPH patients are now treated in an outpatient setting. Those seen in the inpatient setting represent more complex cases in which higher complication rates are expected (the chart represents inpatient results only.) Despite the complexity in these cases, our complication rate is still better than expected.

Dr. Jared Bieniek, a urologist with fellowship training in andrology, provides

further expertise on enhancing male fertility and sexual function services. With his help, we continue to expand our advanced treatment of erectile dysfunction and Peyronie's disease, and provide unique male infertility procedures such as vasectomy reversal, microsurgical varicocele repair, sperm aspiration or extraction and stimulated ejaculation for men with spinal cord injuries.



Inpatient Discharges Source: Premier

# Hartford HealthCare Tallwood Urology and Kidney Institute 2018 Outcomes Report

## OUTCOMES REPORT

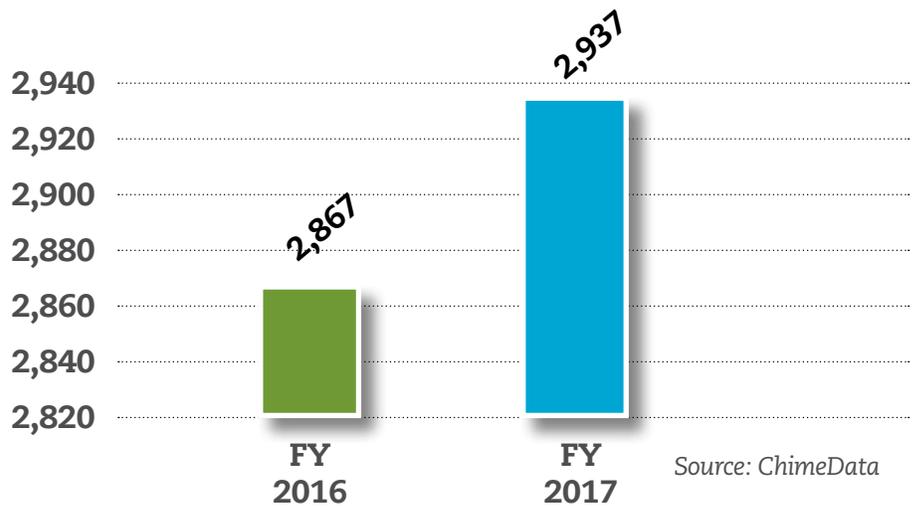
### Chronic kidney disease

One in 10 adults in the United States has some stage of chronic kidney disease (CKD). The incidence of CKD more than doubled in those older than 65 from 2000 to 2008 and the prevalence rate for end-stage renal disease increased nearly 600 percent between 1980 and 2009.

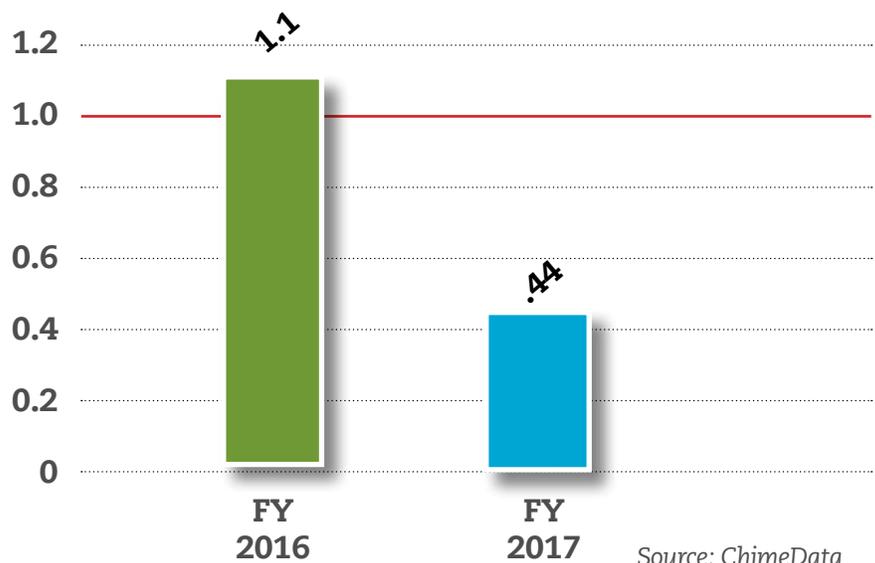
Early detection of kidney disease is important for kidney preservation and quality of life. Our CKD management team includes nephrologists, interventional nephrologists, vascular/access surgeons, emergency room physicians, care coordinators and dialysis nurses. The team focuses on improving the handoffs between acute care hospital and community dialysis centers to address complications and readmission rates. The great work of our team is evident in the large decrease in the readmission rate for FY17.

Hartford Hospital was recognized in *U.S. News and World Report* as high performing for nephrology services.

#### Chronic Kidney Disease Patient Volume



#### CKD Readmission Rate Inpatient (observed/expected rate) (<1 is better than expected)



## OUTCOMES REPORT

### Pelvic health and incontinence

The Tallwood Urology and Kidney Institute pelvic health and incontinence team is made up of fellowship-trained physicians specializing in pelvic medicine and reconstructive surgery, neurourology, urodynamics and female pelvic medicine.

Our team treats even the most complicated cases of incontinence affecting both men and women. We are one of the few practices that can surgically treat both incontinence and pelvic organ prolapse simultaneously, to help avoid multiple surgeries.

We provide a variety of non-surgical and surgical treatment options. This ability to choose puts patients' minds at ease and provides a sense of empowerment and comfort during a difficult time.

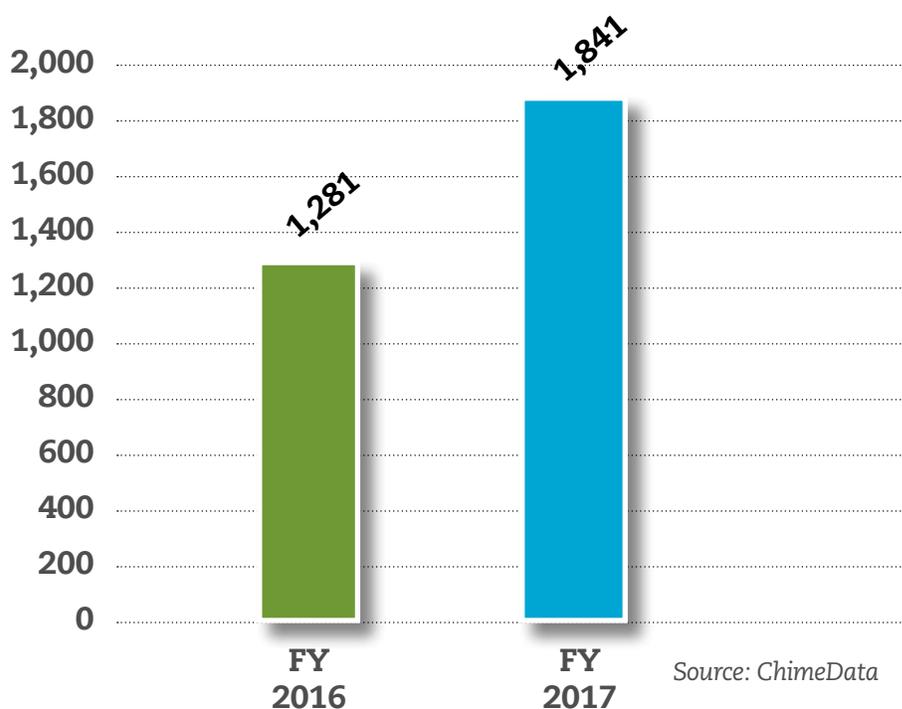
Our multidisciplinary pelvic health team consists of staff from urology, colorectal surgery, physical rehabilitation and psychology services. The team meets regularly with the goal of promoting overall pelvic health by providing individualized comprehensive treatment options. Our team has helped advance the field by contributing to clinical research projects such as pioneering laparoscopic, robotic surgery for pelvic organ prolapse in

the Northeast.

Our expertise and vast experience means we can help, even when previous treatments or surgeries have been unsuccessful. For this reason, we are a

primary referral center for Connecticut and the southern New England region, helping our volume to grow by more than 43 percent from FY 2016 to FY 2017.

#### Pelvic Health Patient Volume (urinary incontinence)



Source: ChimeData

# Hartford HealthCare Tallwood Urology and Kidney Institute 2018 Outcomes Report

## SUCCESS STORIES

## PELVIC HEALTH

### Stefanie Fecteau | Good news for Torrington horse enthusiast

Sometimes you don't know you're looking for something until a television program speaks to you.

Stephanie Fecteau, a 41-year-old Spanish teacher from Torrington, suffered with bladder leakage for years before she saw a segment on the news about a minimally-invasive procedure for women with similar problems.

Millions of women — one in four premenopausal women under the age of 50 and one in three over the age of 50 and postmenopausal — actually suffer from some form of urinary incontinence, which affects their health and quality of life, but most, like Fecteau, suffer silently. The most common type of urinary incontinence is stress urinary incontinence, which involves the leaking of urine when you laugh, cough, sneeze or exercise. This is the result of a weakening in the muscles and tissues supporting the bladder.

"No one talks about this. It's embarrassing!" she said of the leakage, which began 13 years ago after the



**Finding help for bladder leakage means that Torrington resident Stephanie Fecteau can ride her beloved horse without worrying she'll have an accident.**

birth of her youngest child.

She coped with the problem by wear-

ing pads, panty liners and even internal, tampon-like products, but the sense of urgency she felt continued to

# Hartford HealthCare Tallwood Urology and Kidney Institute 2018 Outcomes Report

affect all aspects of her life.

“I’d be running to the bathroom between classes because I always felt like I had to go,” she said.

Fecteau adds that she began avoiding things she enjoyed in life like going to the gym and Zumba classes because all the movement involved in the workouts would cause her to leak more often. She even stopped showing her beloved horse, which she rides daily.

“I show English so we wear bright white pants. There’s no way to wear a pad under that and not have it show,” she said of her passion.

Then she happened to catch a local news segment that focused on the work being done by Elena Tunitsky-Bitton, MD, FACOG, FPPMRS, a urogynecologist with the Hartford HealthCare Tallwood Urology and Kidney Institute at Hartford Hospital.

Fecteau couldn’t believe what she was seeing and that there was a potential cure for her condition. She called the doctor’s office immediately and made an appointment. In December of 2017, she left the



It’s 1,000 percent better! I still find myself crossing my legs when I sneeze, then I think, ‘I don’t have to do that anymore!’



classroom just a few days before Christmas vacation started and had the surgery.

“Many women do not talk about this problem with their friends and do not bring it up with their doctor,” Dr. Tunitsky-Bitton said. “They change their lifestyle and often stop hobbies they enjoy. Other women accept it as ‘normal,’ after all we are told this is what happens after having a baby. Just because it is ‘common,’ doesn’t mean it has to be ‘normal.’ There are various, very effective treatments available.”

During the minimally-invasive procedure, Dr. Tunitsky-Britton, who is board-certified in female pelvic medicine and reconstructive surgery, inserted a special sling to support the urethra. The same-day vaginal surgery takes just 30 minutes and has a success rate of 85 percent in treating stress urinary incontinence. That

made all the difference for Fecteau.

“It’s 1,000 percent better!” she exclaims, adding that, “I still find myself crossing my legs when I sneeze, then I think, ‘I don’t have to do that anymore! I can sneeze and not pee!”

Dr. Tunitsky-Britton said the first important step in addressing stress urinary incontinence is having the conversation with a doctor.

“It can be difficult to talk about such problems, even with a doctor, but healthcare providers, especially urogynecologists, are used to talking about these problems. There are treatments available that help women lead a more active, social and productive life! Every day women tell me, ‘I have my life back.’ For me as a physician, there is nothing more rewarding,” she said.

# Hartford HealthCare Tallwood Urology and Kidney Institute 2018 Outcomes Report

## SUCCESS STORIES

## PELVIC HEALTH

### Susanne Edgerly | Long drive for initial consult was worth the trip

Like many women, Susan Edgerly figured out a way to manage symptoms that made simply urinating an acrobatic challenge until two of her doctors urged her to see a specialist.

At 78, the Kent antiques dealer had felt an unnatural bulge from her vagina for several years and her gynecologist told her she would eventually want or need surgery to secure the organs — her bladder, rectum and uterus — back into place.

Pelvic organ prolapse like Edgerly's is not unusual. In fact, 13 percent of women experience some form of prolapse in their lifetime, mostly due to a weakening or stretching of the muscle and connective tissue that supports the bladder, uterus and rectum.

"There was no pain, but, eventually, I had to push up on the bulge in order to urinate," she recalls. "I didn't realize the extent of the prolapse until I began to urinate whenever I moved my bowels."

Her gynecologist and primary care doctors referred her to Paul Tulikangas, MD, who is board-certified in female pelvic medicine and reconstructive surgery with the Hartford



**Susanne Edgerly talks with her doctor, Paul Tulikangas, MD, after a follow-up appointment to surgery that repaired injured pelvic floor muscles.**

HealthCare Tallwood Urology and Kidney Institute. Dr. Tulikangas, in fact, recently lead a group that created the national guideline on treatment of pelvic organ prolapse

She almost didn't make the first appointment because 90 minutes seemed like a long way to travel for a doctor's appointment for someone

who admittedly "rarely leaves my little village."

"I thought, 'That is so far away!' But the doctors said 'You should consider going to the best and the other things can be worked out.' So I did," Edgerly remembers.

Dr. Tulikangas — who, with his group, are experts in repairing pelvic organ prolapsed through minimally-invasive techniques — repaired her injured pelvic floor muscles in a three-hour procedure done with sutures and her own connective tissue.

"I just kept smiling for the first two weeks!" she said of the results.

Since the surgery in February 2018, Edgerly said she feels free from bathroom concerns and able to more completely focus on buying the Ironstone, wood and apothecary pieces she sells in her shop, Main Street Antiques, creating tableaus in the shop and even doing the paperwork the "old-fashioned" way in ledger-like notebooks.

"Dr. Tulikangas was just wonderful. His manner, his choice of words, the way he listens to me. He's just very warm. I couldn't be happier," she said.

## SUCCESS STORIES

## MEN'S HEALTH

### Michael Carey | Back on course after AUS procedure

Often when the body cannot do for itself, there is a device that can help, something Michael Carey of Colchester discovered when surgery to remove prostate cancer in 2012 left him struggling with incontinence.

“The radical prostatectomy resulted in incontinence which worsened over a number of years,” said the 62-year-old attorney. “When I first had the surgery, they advised me to carry a duffle bag with extra underwear in it while I recovered. I never stopped carrying the bag.”

Many men who have prostate cancer surgery experience urinary incontinence afterwards, but it's usually short term. But, for Carey, there were days when changing underwear wasn't enough and he'd have to change his pants as well. Then he started avoiding long car trips, work-related meetings and committee gatherings that he'd always attended because it became impossible to drive the distance, sit through the session and drive home without anxiety and mess.

He even started skipping tee times.

“I'd get soaked playing golf, which you never really get used to,” he said, adding that absorbent pads were often not enough.



**Michael Carey refused to become home-bound when prostate cancer caused incontinence. He's back on the links after having urinary sphincter replacement surgery.**

His doctor sent him to Dr. Richard Kershen, a board-certified urologist with the Tallwood Urology and Kidney Institute at Hartford HealthCare, who mentioned a procedure called urinary sphincter replacement (AUS) surgery.

The procedure — which has been used for more than 40 years and is

considered the best treatment for male stress urinary incontinence — involves surgical implantation of a pump and inflatable cuff around the urethra that is manually inflated and deflated in order to urinate.

“AUS helps keep the urethra closed when you can't,” Carey explained.

He had the surgery in 2016, returning to Dr. Kershen's office a month later to have the device activated.

“It's worked like a charm ever since. I could immediately see the change — I had been leaking constantly and when he activated the AUS, it stopped,” Carey said. “It's as close to the way it was before the prostatectomy as it's going to get.”

Dr. Kershen said results like this are not atypical.

“Men do not need to become home-bound because of incontinence because it's completely curable,” he said.

Life has basically returned to normal for Carey, who golfs regularly and started going to meetings and taking road trips again.

“I don't have to worry about soiling the chair,” he said of sitting through work-related meetings. “It's a miraculous outcome!”

# Hartford HealthCare Tallwood Urology and Kidney Institute 2018 Outcomes Report

## SUCCESS STORIES

## MEN'S HEALTH

### Joseph Merenda | Rabbi no longer looking for next break

Joseph Merenda's entire life was planned around the bathroom — when he could go, where the bathroom was located, if he could extract himself from social and work-related situations easily enough to go, how long he'd be trapped in there trying to finish.

"I'm a Messianic rabbi and I would be performing a funeral or a wedding, looking for a break so I could run off and go to the bathroom," Merenda says. "I'd go during testimonials in a funeral or while music was playing. It was embarrassing."

Merenda had been seeing Dr. Anthony Quinn, a Waterford urologist, for several years for an elevated PSA level, which is often a sign of an enlarged prostate but can also signal prostate cancer.

"I did not have prostate cancer but I needed check-ups. Then, the problems started so slowly that you'd barely perceive it. I started going to the bathroom once a night, then twice, then three times. But, when the doctor would say, 'How are you doing?' I'd say, 'Fine, I'm doing fine,'" Merenda recalls.

He then had several episodes of prostate infections, or prostatitis, which



I thank  
God every  
day that  
He brought  
me to Dr.  
Quinn.



resulted in a total inability to urinate and required the insertion of a catheter for a week at a time. This proved terribly inconvenient and uncomfortable. After the prostatitis resolved, there were still prolonged visits to the toilet where he'd wait to go for longer and longer periods of time.

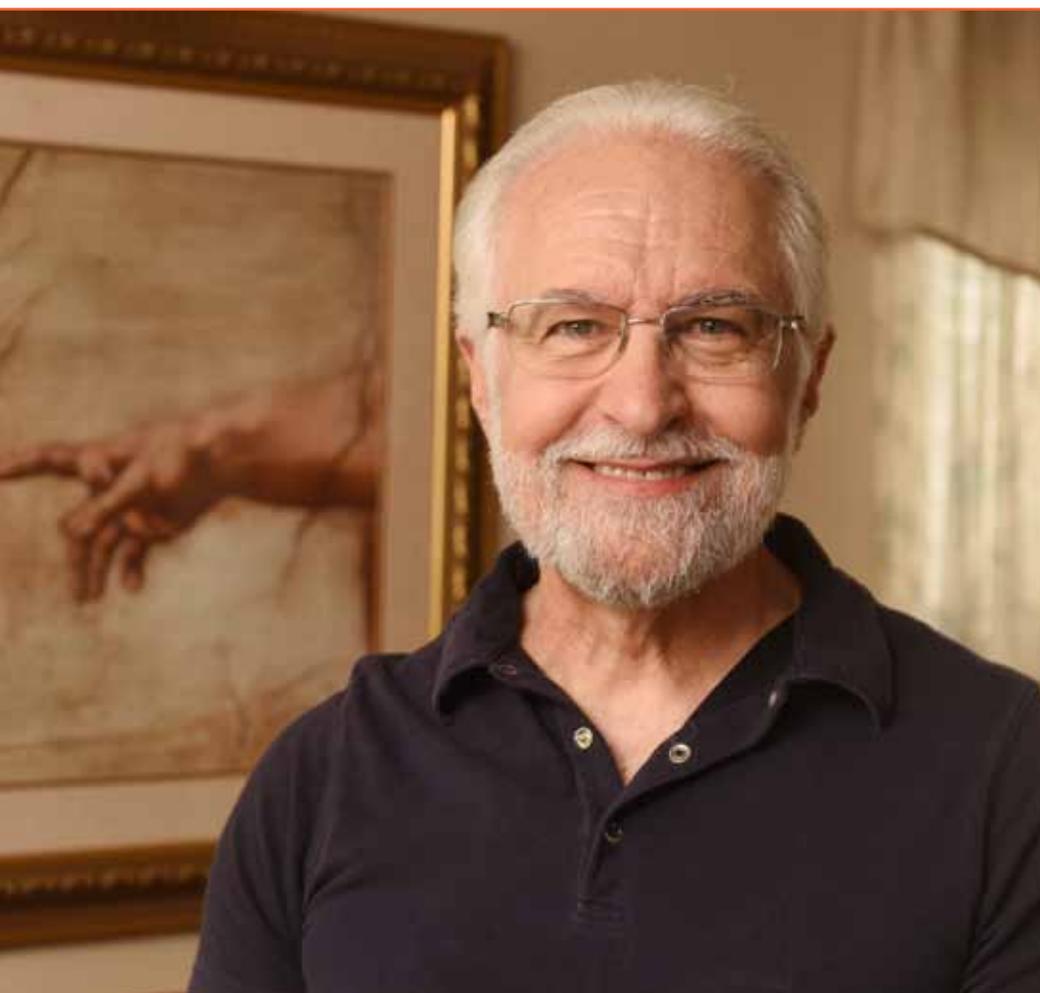
"The last time it was bad. I'd have to urinate but I'd stand there and couldn't go," he says. "Life had become 'when do I go?' and 'will I be able to go?' It was horrible. Medications helped but didn't fix the problem."

Dr. Quinn, affiliated with Hartford HealthCare's Tallwood Urology



and Kidney Institute in eastern Connecticut, suggested a minimally-invasive procedure called a bipolar transurethral prostatectomy (TURP) in which he'd go in through the urethra with a scope and remove the in-

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**Joseph Merenda found himself running off the altar during the religious services he conducts as a rabbi to go to the bathroom until he had prostate surgery.**

three-day hospitalization to an out-patient procedure and remains the gold-standard for relief of prostate obstruction. For patients with smaller prostates, however, even less invasive alternatives are available. In addition, while medications are generally tried first to relieve enlarged prostate symptoms, they do not stop the prostate from growing.

“For patients with progressive symptoms, or those who would rather not be on medications long term, minimally-invasive surgery is often life-changing, as it was in Rabbi Merenda’s case,” he says. “There is no reason to have your life dominated by urinary symptoms. It is very rewarding to be able to offer these procedures which usually result in great improvement in quality of life for men suffering from enlarged prostate symptoms.”

ner part of the prostate. Merenda had the out-patient surgery earlier this year and calls the results life-altering.

“He turned the clock back 30 years!” he exclaims just days before his 65th

birthday. “I don’t think about it. I go when I want to go. The stream is very strong. I thank God every day that He brought me to Dr. Quinn!”

Dr. Quinn notes that the bipolar TURP has converted what used to be a

# Hartford HealthCare Tallwood Urology and Kidney Institute 2018 Outcomes Report

## SUCCESS STORIES

## MEN'S HEALTH

### Douglas Joslyn | Implants make busy worker feel whole again

Douglas Joslyn doesn't like to sit still; after a long career at UPS, he worked at Mohegan Sun, then as a certified nursing assistant and now as a part-time bus driver.

He has always worked hard but cancer surgery in 2015 left him feeling "like less of a man" due to erectile dysfunction.

"They took out my bladder, prostate, lymph nodes and some of my intestines. I am cancer-free but I wasn't happy," said the 74-year-old Griswold resident.

He'd heard of penile implants helping men in his situation, and even knew a man who had one, but he couldn't get the man to talk about it or answer his questions. He had questions about the surgery and the implanted pump components, but mostly Joslyn wanted to know if the penile implant made the man feel whole again.

Unable to get answers to his ques-



I would recommend it to anyone. I'm completely happy with it. There are no negatives as far as I can tell.



tions, he set out to learn more about the implants for himself. His doctor referred him to Dr. Jared Bieniek, a board-certified and fellowship-trained urologist with Hartford HealthCare's Tallwood Urology and Kidney Institute, for a consultation.

Noting that erectile dysfunction affects as many as 30 million American men, Dr. Bieniek first reviewed the array of approved erectile dysfunction treatment options, and Joslyn tried oral medication and penile injections with minimal effect.

In November 2017, he underwent the penile implant surgery. The doctor inserted the three pieces of the im-

plant — two chambers in the penis, a pump in the scrotum and a reservoir under the abdominal muscles — which allows the man to create an on-demand erection by pumping salt water from the scrotal pump into the cylinders located in the shaft of the penis.

Joslyn instantly felt more masculine.

"If anyone ever has any doubts about their manhood after prostate surgery, this procedure will help that. It is fabulous," said the man who recently celebrated his 51st wedding anniversary. "I would recommend it to anyone. I'm completely happy with it."

## SUCCESS STORIES

## KIDNEY STONES

### Lee Steere | Hospital employee made immediate diagnosis

Call it intuition or a product of working in healthcare, but when Lee Steere felt a sharp in his right lower side while walking back from a meeting in early 2017, he knew immediately it was a kidney stone.

“I’ve had back pain before and this felt like nothing I’d ever had. It honestly felt like I was passing a kidney stone,” said the 45-year-old Plantsville resident who works as a unit leader in IV therapy at Hartford Hospital. “Then, the pain worsened and it felt like I was having spasms.”

Steere was determined to avoid medical intervention at first, and started “slugging water” in an attempt to pass the stone on his own. Kidney stones are hard mineral deposits that can form in the kidneys as a result of concentrated urine. Passing them can be painful but generally does no damage to the urinary tract.

In Steere’s case, however, the stone proved a challenge to pass on his own, and seemed to lodge itself in a way that contributed to continuous pain and difficulty voiding. When he went to see Dr. Abram D’Amato, a Tallwood Urology and Kidney Institute urologist, a bladder scan in the office revealed that his bladder was empty despite all the water he’d drunk.

“That’s when they took me to the



**After trying to pass a kidney stone on his own, Lee Steere sought help through a minimally-invasive procedure at the Tallwood Urology and Kidney Institute and was feeling better almost immediately.**

emergency department, where I was treated immediately,” Steere said. “The doctor said the stone had dropped into the ureter (tube connecting the kidneys to the bladder) and during one of my spasms, it stopped in a bend in the ureter and wasn’t going any further.”

Medication for the pain helped stop the spasms and he tried to pass it naturally by drinking lots of water. After unsuccessfully passing the stone naturally, it was determined that surgery was needed.

In a minimally-invasive procedure known as a ureteroscopy, Dr. Jared Bieniek, another Tallwood urologist, was able to insert a special scope through the urethra and into the ureter to remove the stone. Steere was released and returned to regular activities, and his hectic work schedule, quickly.

“From the moment it happened to the emergency room to the follow up with my urologist, the whole experience was pretty positive,” he said.

# Hartford HealthCare Tallwood Urology and Kidney Institute 2018 Outcomes Report

## SUCCESS STORIES

## PROSTATE CANCER

### Gordon Cleland | Attorney well suited for MSK trial



**Gordon Cleland is fighting advanced prostate cancer thanks to the HHCCI and Tallwood team and a Memorial Sloan Kettering Cancer Center clinical study**

When Gordon Cleland found out he had advanced prostate cancer in January 2017, he said he would do whatever it took to beat the disease. An avid runner and swimmer, the 68-year-old attorney said he was prepared physically to take on the rigors of surgery and treatment.

“Truth be told, when I heard my PSA score [of 16], I had some fears about what that would portend and they proved to be correct. I did my best to motivate myself to get treated as quickly as I could,” said Cleland.

His first order of business was to find a top urologic surgeon to remove the cancer. Cleland, who had also recently successfully battled melanoma, asked a provider from another health system for the name of the best urologist in the region. His answer: Hartford HealthCare Tallwood Urology and Kidney Institute’s Dr. Joseph Wagner.

“I’m a lawyer, so when you get competitors recommending people who are not associated with their firm or their hospital, that means something

# Hartford HealthCare Tallwood Urology and Kidney Institute 2018 Outcomes Report



Even if this whole experience only adds one additional year to my life, it will have been worth it.



to me. The guy must be really good,” said Cleland.

Cleland, from Monroe, made the 50-minute drive to Dr. Wagner’s Farmington office to discuss his options for surgery. Typically, a patient with metastatic prostate cancer doesn’t undergo a prostatectomy — surgery to remove part or all the cancerous prostate gland. For decades, doctors believed the procedure wouldn’t be effective if the cancer had already spread to other parts of the body.

“That didn’t make sense to me. I expressed that to Dr. Wagner. He listened to me and started doing some research and speaking to his peers,” Cleland said.

Through the Hartford HealthCare Cancer Institute’s membership in the Memorial Sloan Cancer Alliance, Dr. Wagner found that Cleland would be

a candidate for a recent MSK study.

“Under the study, when there are metastasis to just a few sites, patients undergo androgen deprivation therapy (injections to lower the male hormone testosterone) and radiation to the metastatic sites. The patient goes on to have a prostatectomy,” said Dr. Wagner, director of robotic urologic surgery at Hartford Hospital. “He was a perfect candidate. So we applied the protocol from MSK here locally and he did great.”

Prior to his surgery in late May 2017, Cleland received radiation treatments at Hartford Hospital under the direction of Dr. Andrew Salner, medical director of the Hartford HealthCare Cancer Institute at Hartford Hospital. Dr. Salner said when the cancer has spread to only a limited amount of sites, like in Cleland’s case, those areas can be treated effectively using three to five highly focused sessions

of stereotactic body radiation therapy, generally with few side effects.

“A team of highly specialized physicists and dosimetrists utilize sophisticated software to plan the treatment, and advanced linear accelerator technology not available at most locations facilitates the treatment delivery,” said Dr. Salner.

Following an eight-week course of daily radiation to the prostate bed at a hospital closer to his home, Cleland’s cancer was declared undetectable in August of 2017. He continues to see Dr. Wagner and his oncologist in Fairfield County for routine monitoring.

“I do not now have any detectable cancer, but I’m ready for any further challenge. Even if this whole experience only adds one additional year to my life, it will all have been worth it,” said Cleland.

# Hartford HealthCare Tallwood Urology and Kidney Institute 2018 Outcomes Report

## SUCCESS STORIES

## UROLOGIC CANCER

### Steven Hanson | Surgical patient kept coming back for more

Steven Hanson is a familiar face around the Tallwood Urology & Kidney Institute offices, and not because he's in fixing the vending machines as part of his job.

Since early 2017, the Vernon bachelor has had three separate surgeries to address a series of cancer discoveries in his bladder, ureters and urethra. Little by little, surgeons spent hours removing diseased organs and replacing them with new ones fashioned from other parts of his body so he's able to function as well as ever before.

In hindsight, Hanson said his bladder cancer first emerged in the spring of 2016 when he noticed tinges of blood in his urine several times. Before he could call his doctor, though, it stopped and he chalked it up to an infection that had cleared. Several months later when the blood speckles reappeared, he made an appointment with Dr. Abram D'Amato, a board-certified urologist with Tallwood.

"He did a few different tests on my bladder that fall and transferred me to Dr. (Joseph) Wagner. That's when I knew things weren't good," he remembers, referencing Dr. Wagner's status as a urologic oncologist and director of robotic urologic surgery at



Hartford Hospital. "(Dr. Wagner) told me he couldn't save my bladder but he gave me three options."

Faced with choosing a path quickly because the doctor felt waiting would mean the cancer could spread and kill him, Hanson said he opted to

# Hartford HealthCare Tallwood Urology and Kidney Institute 2018 Outcomes Report



**Steven Hanson has been able to return to work after having bladder cancer removed and a neobladder created.**

done robotically with an incision just large enough to remove the bladder.

“Surgery lasted hours and I was in the hospital for five days, but I was home just a few weeks before I started getting around OK and going to work,” he remembers.

During a follow-up visit, however, tests revealed more cancer, this time in the ureters, tubes connecting the kidneys to the new neobladder to carry waste. That, Hanson said, was removed in a second procedure that left him in remission yet again.

It was late in 2017 that he remembers Dr. D’Amato wanting to check the inside of his bladder to see how it was functioning. With advanced technology inserted through the penis, D’Amato discovered a tumor growing in the urethra, which drains urine from the bladder through the penis to outside the body.

have Dr. Wagner remove his bladder and prostate and craft a neobladder from a section of his small intestine to leave in its place. The surgery was

A third surgery was necessary. The urethra needed to be removed, which would leave Hanson unable to drain the urine from his body. To solve this problem, the team took further advantage of the specialty services within the Tallwood Institute. While Dr. Richard Kershen removed the “outside” portion of the urethra, Dr. Wagner simultaneously removed the “inside” robotically through five tiny incisions and went on to connect the appendix to the neobladder and the skin of the abdominal wall. With a catheter, Hanson is able to successfully urinate on his own every four to five hours and does not need to wear a bag.

“I’m able to do everything I ever did before, including racing cars and boating,” Hanson said happily. “Recovery happened really, really fast and I had no difficulties or infections.”

“Mr. Hanson’s clinical case highlights the advantages of the Tallwood Urology & Kidney Institute,” Dr. Wagner said. “Using a team approach with surgeons having particular expertise in endoscopy, urethral surgery and robotic oncology, he received state-of-the-art care while maintaining the best quality of life possible.”

# Hartford HealthCare Tallwood Urology and Kidney Institute 2018 Outcomes Report

## SUCCESS STORIES

## BLADDER CANCER

### Jane Feldman | Procedure helps mom enjoy son's wedding

There's little worse than feeling ill and getting no answers or having scant options for improvement.

"I was being treated, but the symptoms were getting worse," recalled Jane Feldman, a 62-year-old retiree from Avon about early care for her bladder cancer. "There was increasing amounts of blood in my urine and I just wasn't feeling well in general."

After a trip to a local urgent care center, and a consultation with a urologist at another institution, she made an appointment with Dr. Ryan Dorin, a urologist with the Hartford HealthCare Tallwood Urology and Kidney Institute, where she finally found the treatment options she needed.

Feldman said Dr. Dorin and Tallwood offered minimally-invasive robotic surgery to remove the cancerous bladder and to create a neobladder from a section of her own healthy intestine to allow her to urinate again. Her previous options had only been open surgery to remove the bladder and creation of a urinary stoma which would drain into an external collection bag.

The neobladder was key for an active woman looking forward to wearing a new, gorgeous dress for her son's June wedding. One advantage of the robotic neobladder is that the cosmetic result is superior to other options, and allows



**A neobladder was key to helping Jane Feldman attend her son's wedding without having to tuck a ostomy bag under her dress.**

patients to feel as normal as possible after bladder removal.

"Before I met Dr. Dorin, I didn't think I would make it to the wedding. My dress just wasn't conducive to an ostomy bag!" she said.

The robotic surgery in November 2017 proved a "great experience" that spared her reproductive organs and, after less than a week in the hospital, left her feeling greatly improved overall.

"I am fortunate for the technology be-

cause I know the open surgery would have been much harder," Feldman said.

These days, she's outside gardening — she's a retired greenhouse employee — or taking three-mile walks with her Siberian husky.

"I just came in from working outside. I've been up and around a lot since the surgery. You know, when you feel continually bad and nothing is being done, you start to think it's you. It wasn't and I feel like my old self again," she said.

## SUCCESS STORIES

## BLADDER CANCER

### Paul Mikkelson | In-depth surgery gets patient back on the bike

Feeling “great” and not eager to carve out time for his annual physical in 2017, Paul Mikkelson almost didn’t make an appointment; luckily, he did.

The urine sample he gave as part of the routine testing revealed traces of blood. A second sample taken at a later appointment with his urologist also found blood, and a procedure called a bladder cystoscopy then discovered two cancerous tumors causing the trouble.

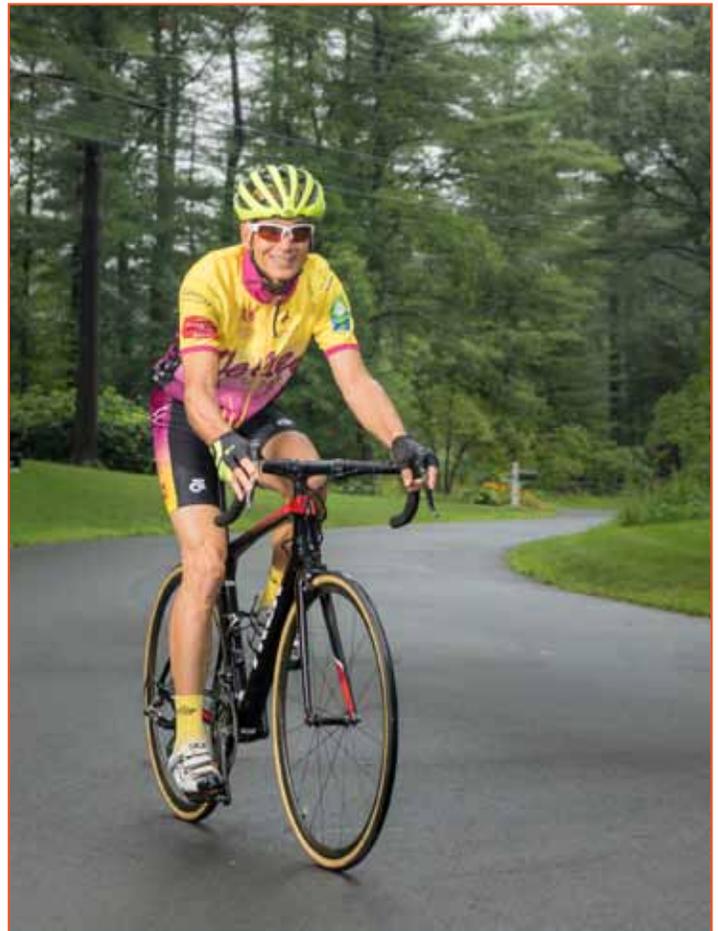
“I had absolutely no symptoms. My primary care doctor thought maybe I was just dehydrated because I ride the bike so much,” the 64-year-old Simsbury resident noted.

Pathology reports on the tumors that were scraped from his bladder revealed an aggressive form of cancer and the need for further action. The self-proclaimed “analytical” sort was left to decide between a second attempt to scrape all traces of the disease out of the organ to save it and surgery to remove the bladder completely.

He sought expert opinions in New York and Boston. He set up a consultation with Dr. Anoop Meraney, director of urologic oncology with the Hartford HealthCare Tallwood Urology and Kidney Institute. Input was varied, but he eventually opted for the more radical option of surgery.

“I was quite impressed with Dr. Meraney. He answered every question I had, in the order in which I’d written them down. Then he said, ‘Whether I do it or not, you need to get this bladder out,’” Mikkelson remembers. “He’s also analytical and super intelligent.”

In June 2017, Dr. Meraney removed his bladder and left an external ostomy bag in its place to collect urine. The father of two adult children said it was a “wonderful experience” overall.



**Paul Mikkelson is a fixture around Simsbury on his bicycle, a hobby he can enjoy again thanks to surgery for bladder cancer.**

“I feel like I’m healthier today than I was before the surgery. He took out my prostate too, so I don’t get up at night to go to the bathroom. I’m finally getting a good night’s sleep, which helps with healing!” Mikkelson said. “I’m back to everything I love doing — I ride the bike 50 to 60 miles at a time, I go skiing and golfing.”

# Hartford HealthCare Tallwood Urology and Kidney Institute 2018 Outcomes Report

## COMMUNITY INVOLVEMENT

### Outreach programs, events spread the word

#### Educating our community

Our team believes that educated patients get better outcomes. We have provided 19 community education events this year based on topics our Disease Management teams identify as valuable for patients. Some highlights include:

- Understanding Bladder Cancer
- Understanding Kidney Cancer
- Understanding Prostate Cancer: Breaking Research
- Understanding Prostate Cancer: Role of Nurse Navigator
- New Developments in Radiation Treatment for Prostate Cancer
- Understanding Prostate Cancer: Treatment Options (PSA screening)
- Bladder Cancer: From the Eyes of a Medical Oncologist
- Cardiac Considerations in Cancer Care
- Life After Prostate Cancer
- Understanding Kidney Stones
- Understanding Benign Prostatic Hyperplasia
- Female Incontinence

#### Supporting the community

This year, the Hartford HealthCare Tallwood Urology and Kidney Institute continued our partnership with ZERO Prostate Cancer, a national not-for-profit organization dedicated to eliminating prostate cancer through awareness, research and education. Our second annual ZERO Prostate Cancer Run/Walk awareness event was one of the most successful in the country, raising more than \$110,000 to help end prostate cancer.



#### Educating our team of physicians

At Tallwood, we believe in the importance of continuing education for our providers. This year, we held such educational opportunities as:

- Advanced practitioner hands-on simulation training to reinforce and strengthen clinical competencies for urologic procedures
- Enhanced training in managing stomas for advanced practitioners
- Urological medical device testing and simulation training to evaluate as well as identify opportunities to improve and enhance patient care outcomes
- Memorial Sloan Kettering/Hartford HealthCare cancer retreat to review standards of care

# Hartford HealthCare Tallwood Urology and Kidney Institute

## 2018 Outcomes Report

### Recent Publications

For a complete list of publications by our doctors, please visit [hartfordhealthcare.org/services/urology-kidney](http://hartfordhealthcare.org/services/urology-kidney).

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# Hartford HealthCare Tallwood Urology and Kidney Institute

## 2018 Outcomes Report

### Recent Publications

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Aghazadeh, M, Frankel, JF, Belanger, M, McLaughlin, T, Staff, I, and Wagner, J. Oncologic Outcomes After Radical Prostatectomy in Favorable Intermediate Risk Group Active Surveillance Candidates. *J. Urol.*, Vol 197, Issue 4, e1054-1055. Abstract PD55-10, AUA Annual Meeting, Boston, MA.

Alam S, Staff I, McLaughlin T, Champagne A, Tortora J, Kershen R, Wagner J. EPIC 26 Identifies Men Likely to Benefit from Surgical Interventions for Male Stress Incontinence after Radical Prostatectomy. Poster presentation at American Urological Association, New England Section, 2017 Annual Meeting.

Alam, S, Staff, I, McLaughlin, T, Champagne, A, Tortora, J, Kershen, R, and Wagner, J.: EPIC26 Identifies Men Likely to Benefit from Surgical Interventions for Male Stress Incontinence after Radical Prostatectomy. American Urological Association New England Section Annual Meeting, Montreal, Canada, Abstract P26.

# Hartford HealthCare Tallwood Urology and Kidney Institute 2018 Outcomes Report

## Recent Publications

For a complete list of publications by our doctors, please visit [hartfordhealthcare.org/services/urology-kidney](http://hartfordhealthcare.org/services/urology-kidney).

Armstrong, J, Haddock, P, Wiener, S, Staff, I, Cusano, J, and Wagner, J.: Timing of Confirmatory Biopsies Influences Eligibility for Active Surveillance. *J. Urol.*, Vol 197, Issue 4, e1029. Abstract MP77-19, AUA Annual Meeting, Boston, MA.

Bieniek, Jared. Invited speaker at Chilean Andrology Society Annual Meeting (March 9-10) in Santiago on evolving male body habitus and fecundity, novel biomarkers of male infertility and an update on male oncofertility.

Ferrara, Sarah, Keith Jarvi, Jared Bieniek. "Sperm ultrastructural defects in men with severe asthenospermia is not a poor prognosticator for varicocelectomy outcomes." Poster presentation at AUA Annual Meeting, Boston, MA, May 13, 2017.

Frankel, JF, Belanger, M, Tortora, J, McLaughlin, T, Staff, I, and Wagner, J.: Caprini Score Predicts Venous Thromboembolic Events in Patients Undergoing Robotic Assisted Prostatectomy. *J. Urol.*, Vol 197, Issue 4, e635. Abstract MP47-17, AUA Annual Meeting, Boston, MA.

Kershen, Richard (as a panelist). Management of Refractory OAB. American Urological Association, New England Section, 2017 Annual Meeting.

Morosky C, AC Steinberg. Ultrasound Assessment of Fetal Head Position. APGO/CREOG. Orlando FL 3/2017.

Steinberg AC, D Soergel, D Burt, F Skobieranda. Gastrointestinal Tolerability with Oliceridine, a Novel  $\mu$  Receptor G Protein Pathway Selective ( $\mu$ -GPS) Modulator. ACOG, San Diego, CA 5/2017.

Steinberg, Adam. "Enhanced Recovery After Surgery to Improve Patient Outcomes", SGS Post Graduate Course, San Antonio, TX 3/26/2017.

Wagner, Joseph (as a panelist). Management of Advanced Prostate Cancer American Urological Association, New England Section, 2017 Annual Meeting.



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