In early 2021, as Mercy Philadelphia Hospital prepared to transition to the PHMC Public Health Campus on Cedar, making sure patients still had access to all the care they would need was a crucial concern. Penn Medicine took on the role of staffing the emergency, inpatient, and behavioral health services at what’s now known as HUP–Cedar. However, patients needing surgeries and other resource-intensive procedures would get that care at the main HUP campus at 34th and Spruce streets (HUP–Spruce).

Identifying which patients need surgery, and how urgently, would be a challenge without surgeons on-site. There was also the matter of making sure the patients, many of whom receive Medicaid and may lack access to primary care, received the appropriate surgical follow-up care. “For them, the 2.3 miles’ distance to the main HUP campus is not inconsequential,” said Lisa J. George, MS, a master improvement advisor for HUP Quality and Patient Safety based at Cedar. “So it is important that we design solutions to support them.”

The answer: an innovative model in which two physician assistants, Margaret “Maggie” Erdman, MMS, PA-C, and Katrina “Katie” Dlugosz, MMS, PA-C, along with senior surgical resident physicians, provide full-time, in-person surgical consults at HUP–Cedar and collaborate remotely with Penn surgical faculty. The on-site surgical access team began in early 2022 and manages an average of over 20 surgical consults per week, in addition to coordinating follow-up care. The HUP–Cedar Surgery Quality Improvement Workgroup—founded by George and HUP surgical resident Sara Ginsberg, MD, MS, to monitor patient outcomes under this new care model and drive process improvement—was recognized in April with an achievement award at the Hospital and Healthcare Association of Pennsylvania Leadership Summit in Harrisburg.

Helping Patients on Their Way to Surgical and Non-Surgical Treatments

Evaluating patients at HUP–Cedar means it’s possible to assess whether their condition requires surgery, to support them through their follow-up care needs either way, and to speed up access to emergency surgery when needed.

Helping these patients at every step of the way means identifying which patients need surgery, and how urgently, along with assisting, assisting, assistants, Margaret “Maggie” Erdman, MMS, PA-C, and Katrina “Katie” Dlugosz, MMS, PA-C, with resources including a video demonstrating how to use naloxone to reverse an opioid overdose from opioids. Anesthesiologists website that Milas spearheaded, with resources including a video demonstrating how to use naloxone to reverse an opioid overdose.
It’s not uncommon for patients to drive many miles for their appointments at Penn Medicine. Heart-lung transplant recipient Evan Rood, 32, went the extra mile—or rather, thousands of them. In March, the Seattle architect flew across the country for his five-year follow-up visit at the Hospital of the University of Pennsylvania (HUP). While some patients would choose to get their follow-up care locally, Rood is filled with deep gratitude for the team that not only took a chance on him when other transplant centers would not, but with whom he formed deep bonds.

Rood first fell ill while in college in Oregon, and after he graduated in 2014, he finally received a diagnosis of systemic sclerosis, a rare, chronic autoimmune condition often leading to life-threatening lung and cardiac diseases necessitating transplantation. In 2016, living in Seattle, he was in heart failure and his condition rapidly deteriorated to the point he urgently needed combined heart-and-lung transplantation surgery.

Many lung and heart transplant programs rejected Rood as a transplant candidate due to his challenging underlying diagnosis; there are few thoracic organ transplant centers in the country willing to take on this patient population. His cardiologist at the University of Washington, in Seattle, advised him to reach out to Penn’s heart transplant program based on the program’s experts in performing transplants in patients with this condition. Pulmonologist Maria Crespo, MD, and cardiac and thoracic surgeon Christian Bermudez, MD, medical and surgical directors of Penn’s lung transplant program, respectively, accepted his case, and performed his transplant in March 2018.

For this moment came on April 30, 2023, when she stood beside Myles While Heard was happy to finish her treatment, her proudest moment came on April 30, 2023, when she stood beside her son Myles, a nurse practitioner in Radiation Oncology who treated Heard, said, “This drive, willingness to overcome any obstacles, and perseverance stimulated the team at Penn to offer him transplant despite a rapid decline in his health condition. We are proud of what we have accomplished working together with Evan and his family.”

Rood lived at HUP for more than 15 months before and after the transplant, including multiple rounds of rejection, but he was able to go home to Seattle in March 2019 feeling “reborn.” He returned to Philadelphia in the fall of 2019 for his six-month follow-up appointment, and if not for the COVID-19 pandemic, he would have returned for many more visits before his five-year visit in 2023.

In the interim, he has stayed in touch with many care team members, who, besides providing medical care, played board games, shared their lunch breaks, and just spent time with him when he lived at HUP. During his recent trip back, he made time to see many of them for happy hours and other non-medical visits.

“Penn hires great medical personnel who go above and beyond for their patients,” Rood said. “I was in the hospital long enough that I created a community of friends among my nurses, doctors, physical therapists, and occupational therapists … They meant so much to my family.”

Today, Rood lives with his girlfriend, works for an architecture firm, owns his own design consultancy, and coaches high school lacrosse. He says he is under no illusions that he is cured—he takes several different medications daily—but he feels confident about his future, something that wasn’t guaranteed five years ago.

It is unusual and special that Rood continues to receive his follow-up transplant care at Penn, but “like us, he is committed and values the team-based approach that we take,” said Stacey Doll, director of clinical operations for transplant administration. It is also significant, but not unusual, for HUP staff to connect deeply with patients and their families during prolonged pre- and post-transplant hospitalizations, Crespo and Bermudez said.

“A bond forms between a patient, their caregivers, and the team as there are often shared goals around the fight to survive and treat a life-threatening condition,” Crespo said. That closeness comes from the wait for an organ that may not come in time to sustain life; the challenges of post-operative recovery; and the re-acquisition of activities of daily living, such as self-care, walking, meal preparation, and driving. “Every case is special and unique … The HUP staff recognize this and personalize care.”

Nearly 3,000 MILES Is Nothing for This Grateful Transplant Patient

“Evan represented a technical and management challenge considering his need for a combined heart and lung transplantation in the setting of his scleroderma and connective tissue disease that makes the postoperative care much more complicated,” Bermudez said. “His drive, willingness to overcome any obstacles, and perseverance stimulated the team at Penn to offer him transplant despite a rapid decline in his health condition. We are proud of what we have accomplished working together with Evan and his family.”

As of now, both Heard and her son are cancer-free, and she approaches the future with gratitude for everyone who was there for both of them, including the care teams at CHOP and Penn. “Myles and I have both faced a lot of adversities,” Heard said, “and I am just so incredibly indebted to everyone.”

“There, Charlene Heard documents the moment as her son Myles rings the chime signifying the end of his leukemia treatment,” Bottom right: Evan Rood and his younger sister Mica—who served as his guardian during the transplant process—pose for a photo in March 2023 with some of his care providers on the ICU floor where he spent several months in 2018.

Right: During Rood’s five-year follow-up visit, Maria Crespo, MD, his pulmonologist and the medical director of Penn’s lung transplant program, took him on a tour of the HUP Pavilion.

A MOTHER AND SON GET THROUGH CANCER Together

Charlene Heard has been through a lot. When her teenage son Myles was diagnosed with leukemia in early 2021, in the middle of the COVID-19 pandemic, the single mother had recently lost her mother and her aunt—two key members of their support system. Then, in between visits to the Children’s Hospital of Philadelphia (CHOP) for Myles’ chemotherapy, Heard was diagnosed and treated for two brain aneurysms. And in April 2022, she received her own cancer diagnosis at Penn’s Abramson Cancer Center. She had bilateral breast cancer, with a different cancer in each breast, and she also carried the BRCA gene mutation, which is linked with an increased risk for breast and ovarian cancer. A few months before her double mastectomy at the Hospital of the University of Pennsylvania (HUP), her sister suddenly died.

How does one go on? Heard said her love for her only child kept her grounded. “I didn’t want to bring down his spirits by sulking and crying all the time,” Heard said. “I had to keep her grounded. “I didn’t want to bring down his spirits by sulking and crying all the time,” Heard said. “I had to think ‘You get your emotions out, and now it’s time to refocus and look at what you’re trying to achieve.’ … I had to think about what was best for my child.”

On Dec. 15, 2022, Heard completed 15 weeks of radiation at the ACC with Myles, then a freshman at Temple University, by her side. Emily E. Smith, CRNP, MSN, a nurse practitioner in Radiation Oncology who treated Heard, said it was a privilege to be part of the community caring for Heard and her son and to share in their joy. “Charlene’s strength and determination during her treatment are inspiring to every member of her care team,” she said.

While Heard was happy to finish her treatment, her proudest moment came on April 30, 2023, when she stood beside Myles as he rang the chime at CHOP’s Buerger Center for Advanced Pediatric Care, signifying the end of his own cancer treatment. With them were many friends and neighbors from their West Philadelphia community who have rallied around them with meals, financial donations, and emotional support during this whole journey.

As of now, both Heard and her son are cancer-free, and she approaches the future with gratitude for everyone who was there for both of them, including the care teams at CHOP and Penn. “Myles and I have both faced a lot of adversities,” Heard said, “and I am just so incredibly indebted to everyone.”

> Above: Charlene Heard documents the moment as her son Myles rings the chime signifying the end of his leukemia treatment. A few months earlier, as soon below, he was by his mom’s side when she rang the bell at the Abramson Cancer Center to celebrate the end of her radiation treatment for breast cancer.

Penn Medicine