



**Bobbie Kai**  
CCS,  
*Contract Coding  
Consultant*

## OA EMPLOYEE SPOTLIGHT

I'm from a small town in northeast Nebraska named Norfolk, which is the hometown of Johnny Carson. I started in HIM right out of high school at the local hospital in Norfolk. I first did transcription for a number of years. I learned all aspects of HIM at this hospital. When our Director of HIM decided to "grow her own" coders, I was given the opportunity to take a home coding course through AHIMA. That was in 1990. I became certified in 1996. I spent 25 years at the same hospital. In 2006, I felt the need to expand my horizons and became a traveling coder. Since then I have worked for several hospitals throughout California, Oregon, and the Cleveland Clinic in Ohio. One of the best things about being a traveling coder is getting to see new places and meet new people.

In my spare time, I enjoy being with my elderly parents, my three children, and my five grandchildren. I also enjoy reading, country dancing, and fishing, which is why I take my boat out every chance I get.

I joined the On Assignment HIM team in 2010, and have worked almost exclusively in San Diego. I couldn't ask for a more beautiful place to work, especially in the winter. Working with Bryan Seshun, Nate Haros, and Brian Lasch assured me I'd made the right decision in coming to work for On Assignment.

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?WHO KNOWS?

## Optimism Is Healthy

*By Adam Kahn*

Chris Peterson was teaching a class in abnormal psychology at Virginia Tech when he told his students to fill out an Attributional Style Questionnaire – a carefully designed test that determines a person's level of optimism and pessimism. The students also answered questions about their general health, including how often they went to a doctor.

Peterson followed the health of his students the following year and discovered that the pessimists had twice as many infectious diseases and made twice as many trips to the doctor as the optimists.

Later, Martin Seligman of the University of Pennsylvania and two of his colleagues, using interviews and blood tests, found that optimists have better immune activity than pessimists. Studies by other researchers show the same thing. Why? One big factor is that "Pessimistic individuals," as Seligman writes, "get depressed more easily and more often."

When a person is depressed, certain brain hormones become depleted, creating a chain of biochemical events that end up slowing down the activity of the immune system. For example, two key players in our immune systems are T cells and NK cells.

**T CELLS** recognize invaders (like viruses) and make more copies of themselves to kill off the invaders. Pessimists' T cells don't multiply as quickly as optimists', allowing invaders to get the upper hand.

**NK CELLS** circulate in the blood and kill whatever they come across that they identify as foreign (like cancer cells). Pessimists' NK cells can identify foreign entities, but they don't destroy them as well as the optimists' NK cells.

Optimists also look at information in more depth to find out what they can do about the risk factors. In a study by Lisa Aspinwall, PhD, at the University of Maryland, subjects read

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## ASK THE EXPERT

### What is Nanomedicine?

**Nanomedicine** is a subfield of nanotechnology. It is often defined as the repair, construction, and control of human biological systems using devices built upon nanotechnology standards. Nanomedicine is the medical application of molecular nanotechnology (the engineering of extremely small machines) to the prevention and treatment of disease in the human body. This evolving discipline has the potential to dramatically change medical science.

Established and near-future Nanomedicine applications include activity monitors, chemotherapy, pacemakers, defibrillators, biochips, OTC tests, insulin pumps, nebulizers, needleless injectors, hearing aids, and medical flow sensors, as well as blood pressure, glucose, or other chemical imbalance monitoring, and drug and hormone (other chemicals) heat or light delivery systems. Also, specific augmented repair of damaged or diseased cellular tissues (e.g. aging, cancer, Alzheimer's disease, HIV, infection, trauma, etc.)

### On Assignment HIM

will be at the

**Ohio HIMA (OHIMA)**

**Annual Conference**

**March 26-28 in Columbus, OH!**

Meet members of the  
HIM Team at booth 61 and enter for  
your chance to win an  
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# OA Employee of the Month



## Mike Harrington

Senior Account Executive  
HIM Contract Team

I was born and raised in Bowie, Maryland, the older of two boys. I graduated from Elon University in North Carolina with a dual concentration business degree in finance and marketing. While attending Elon University, I spent a semester studying abroad in Perth, Australia. I have to

say that was one of the most amazing experiences of my life! Amazing in terms of culture and amazing in that the 24-hour flight across the world was the FIRST time I had ever stepped foot on a plane! I was lucky enough to visit Singapore for four days prior to Australia and spent the last ten days of my semester abroad touring around Sydney, Australia.

After graduation I started my work career selling signs for a national sign company. After a few months selling signs, I worked for a start-up company selling lab-created gems called moissanite. It was a great experience that allowed me to travel throughout the country to attend trade shows and conduct sales trainings. After three years with that company I decided I needed a change, so I quit my job and I moved to San Diego, California. My plan was to stay in San Diego for two to three years and then eventually move back to the East Coast where my family and close friends from college live. I didn't think I'd love San Diego as much as I do, so my original plan turned into a "no plans to move anytime soon" plan. I'll be celebrating ten years in San Diego on June 2nd of this year!

I've worked in the staffing industry since I moved to San Diego. I started off as a Recruiter, recruiting per diem nurses for in-home patient care and was eventually promoted to General Manager of the San Diego branch office.

After three successful years with that company, I decided to make a switch and have been with On Assignment ever since. I feel fortunate to work for a company that is dedicated to the success of its employees and clients. I enjoy the challenges that the staffing industry brings on a daily basis and can honestly say it's never boring!

After work is done, I enjoy hanging out with friends and am an absolute sports nut (Carolina Tar Heels Basketball and Redskins Football!). I play in a competitive men's softball league during the week. I've also participated in a beach volleyball league, flag football, basketball, bowling, and a competitive Skee-ball League!



(Continued from page 1, Main Article)

health-related information on cancer and other topics. She discovered that optimists spent *more* time than pessimists reading the severe risk material and they remembered more of it.

"These are people," says Aspinwall, "who aren't sitting around wishing things were different. They believe in a better outcome, and that whatever measures they take will help them to heal." In other words, instead of having their heads in the clouds, optimistic people look. They do more than look, they seek. They aren't afraid to look into the situation *because* they're optimistic. Thus, for yet another reason, optimists are likely to be healthier.

The best news is what research has shown repeatedly: Anyone can become more optimistic with effort. And every effort you make to keep an optimistic attitude will reward you with a stronger immune system. So you'll enjoy better health. And it is also true that the better your health, the easier it is to maintain an optimistic outlook.

To view this article: <http://www.youmeworks.com/optimismishealthy.html>

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*On Assignment*  
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## Certified Tumor Registrar (CTR)

On Assignment Health Information Management offers cost-effective staffing solutions for the management and utilization of patient data, ensuring its timely availability. We assist healthcare organizations in meeting their operational goals by providing qualified **Certified Tumor Registrar** consultants for contract, contract-to-hire, and direct hire positions.

We recruit experienced **CTR** professionals credentialed by the **National Cancer Registrars Association (NCRA)** who are able to:

- Accurately review and abstract health information from patient medical records such as demographic characteristics, history of neoplasm, final diagnosis stage, extent of disease (metastasis), and treatment (diagnostic and surgical procedures, administration of chemotherapy, radiation therapy, biological response modifiers, etc.), and assign mandated oncology codes - entering data into a cancer registry database to allow for uniform data collection.
- Prepare statistical reports, narrative reports, and graphic presentations of tumor registry data for use by hospital staff, researchers, and other users of registry data.
- Maintain registry with follow-up information such as quality of life and length of survival of cancer patients.
- Maintain and manage an effective cancer registry program (including the management and supervision of subordinate registry staff) at either a local, state, or national level.

Many of our CTR professionals are recruited from institutions with ACoS approved cancer programs, and are familiar with SEER.

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# Set the Record Straight with *OnAssignment*

Health Information Management

**February 2012  
?WHO KNOWS?**

**And the winner is....**

**Jean K.!**

**Answer:  
Hyperaesthesia**

## ? WHO KNOWS ?

\_\_\_\_\_ is an inherited arrhythmia that causes sudden unexpected cardiac death in apparently healthy individuals. This inherited arrhythmia causes the bottom chambers of the heart (the ventricles) to beat so fast that they can prevent the blood from circulating efficiently in the body. When this situation occurs (called ventricular fibrillation), the individual will faint and may die in a few minutes if the heart is not reset. While this is a disease that usually affects people in their 30's, it has occurred in people of all ages.

**Send your answers to:**

[kristin.walsh@onassignment.com](mailto:kristin.walsh@onassignment.com)

**All correct answers will be put into a raffle  
for a chance to win a \$25 gift card from**

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## DID YOU KNOW ?

**Fatal Familial Insomnia (FFI)** is an extremely rare (only 40 families with about 100 victims worldwide have been documented with the condition that was identified only 10 years ago) genetically inherited autosomal dominant sleep disorder. It is caused by a mutation on gene PNP<sup>R</sup>, which affects the production of protein PrP<sup>c</sup>; the mutated variant of the protein is named PrP<sup>Sc</sup>. Due to the autosomal dominant nature of the condition, should only one parent have the mutant gene, their progeny have a 50% chance of inheriting and subsequently developing the disease.

The condition is caused by a prion disease (an infectious agent composed of protein in an aberrant misfolded form replicates by converting their properly folded counterparts into similar misfolded forms) affecting the brain.

Fatal Familial Insomnia is always a terminal condition within 18 months of onset and is manifested in four stages:

**Stage I** – symptoms include sleeplessness with sudden onset, panic attacks, and phobias – the duration is four months.

**Stage II** – symptoms in Stage I worsen with a manifestation of severe hallucinations (either auditory and/or visual), and the duration is approximately five months.

**Stage III** – symptoms of rapidly occurring weight loss, diminished mental performance, and total insomnia – the duration is three months.

**Stage IV** – symptoms of suffering with dementia and the inability to respond – the duration is six months.

The patient eventually dies due to total sleeplessness and subsequent progression into a coma.

