

2013.10

Our Features in Kawasaki Saiwai Clinic



I. Integrated Care



Takahiro Sugiyama, M.D.
Director

In September 1998, Kawasaki Saiwai Clinic was established as a facility of the Sekishin-kai group. The forerunner of the clinic was an out-patient unit of Kawasaki Saiwai Hospital, which had 203 beds.

Nowadays, there are 23 fields of medicine we practice, such as internal medicine, surgery, and orthopedics. As we cooperate with Kawasaki Saiwai Hospital and other hospitals and clinics in the area, we provide services in high quality. We have multi-slice CT, MRI, mammography, endoscope, US echo, bone densitometer, and biochemical examination devices in the clinic. So, it's possible to make accurate and quick diagnoses and begin effective treatment. Every day, a total of 173 staffs, including 34 doctors, serve for about 1,100 patients.

II. Electronic Medical Recording System

In 1998, Electronic Medical Recording System was first introduced into the clinic. It was relatively fast adaptation in Japan. The reason why we adapted the system was a necessity to share clinical charts with Kawasaki Saiwai Hospital, which does the inpatient and emergency medical care. Nowadays, in this Kawasaki area, the Sekishin-kai group has 1 hospital, 3 clinics, 2 home care stations, and those facilities are connected online to share charts and images. And also, laboratory test, biochemical examination and diagnostic radiography are all linked with the Electric Medical Recording System. So, accurate and quick orders go to each section, and doctors can get results quickly, too. And, for patients, it leads to short waiting time.

III. Home Medical Care and Community Network

We think "Treatment is the collaboration with patients, families, and medical staffs". So far, we have grappled with self-supervised therapies, such as self-administration in hemophiliacs (1977~), home hemodialysis (1978~), home oxygen therapy (1979~), CAPD (Continuous Ambulatory Peritoneal Dialysis, 1982~), home mechanical ventilation (1986~). By the experience, we have recognized the power of patients and their families.

And, since 1979, for those patients unable to come to the clinic, we have offered

home medical care and home nursing. For example, our doctors and nurses visit patients suffer from cerebral infarction sequelae, rheumatoid arthritis, chronic malady, dementia, or terminal cancer. We have witnessed a patient who was bedridden in hospital became full of life at home and his condition also became better. And then, as the patient became better, his caregiver became composed, too.

Constructing a Care Network in our community is one of our aims. So, as the center of the network, we cooperate with 3 home care stations, 1 home care support office, 1 home helper station in the area. Of course, we hold regular conferences that visiting nurses, care managers, social workers, and visiting pharmacist are present to provide better services. The goal and duty in medical care are making conditions that patient desires, even they may have a handicap, disorder, or disease. In near future, the number of patients who have serious condition and receive highly advanced treatment at home will probably increase. Last year, the number of patients we were present at their deathbed at home or nursing home was 78. And now, we visit about 180 patients.



IV. For Patients' Convenience

We have made an effort to answer to the needs in our community. Because “medical care is for the people with serious troubles and/or demands, and medical care professionals should be in close to the people to serve direct and professional care” (by Dr. Sugiyama, the Chief of Staff).

Besides daytime in weekdays, we are also open...

- ✓ Evening hours (17:30~20:00, Monday through Friday)
- ✓ Saturday (9:00~12:00, 14:00~17:00)
- ✓ Sunday (only internal medicine and pediatrics)
- ✓ New Year's holiday and the consecutive holidays in May

Various services we offer...

- ✓ Ask-A-Nurse Desk
- ✓ Nutrition Guidance
- ✓ Psychological Counseling
- ✓ Lectures for Diabetics
- ✓ Home-Visit Rehabilitation

V. In Case of a Natural Disaster

In 1995, when the Great Hanshin Earthquake occurred, damage was not limited to houses, many medical facilities were also hit by. So, in the area, medical care couldn't work sufficiently.

As we learned a lesson from the disaster, this building is a seismically isolated structure and we have our private power generation system. So, even after the earthquake and tsunami in 2011, when the electricity shortage occurred, we were able to continue working.

<An isolation system in building basement >



VI. Medical Devices in the Clinic



Open MRI



SOMATOM Sensation 64/Cardiac 64



MAMMOMAT 3000 Nova



EVIS LUCERA OLYMPUS GIF TYPE XP260N

 A patient's daily life at home



A scene from our home medical care



A scene from our home medical care



By request, a doctor examines a family member



A patient's daily life at home



A family member gives a massage under the guidance of a physical therapist



On home-visit rehabilitation



On home-visit rehabilitation

