

# Focused On You

Summer/Fall 2023

Health News and Information from MedStar Montgomery Medical Center

## Pain free: The sky's the limit for retired paratrooper



**Inside:** Bloodless Medicine and Surgery program expands options for lifesaving care | State-of-the-art screening provides a brighter picture of heart health | Two days after hip replacement surgery, retired vet is walking tall, pain free | Feeling fortunate: Minimally invasive procedure reduces risk of stroke | Compassionate care when it absolutely mattered most

# Specialized services and advancements focused on a bright future.



Hello, I am Emily Briton, and I am honored to join MedStar Montgomery Medical Center as the sixth hospital president. As a longtime Montgomery County resident, I am thrilled to become part of this hospital's rich tradition of compassionately delivering exceptional care to our community.

Since my arrival in July, I have had the pleasure of connecting with our exceptional associates and engaging with numerous community members, all of whom have embraced me with open arms. The warmth I have received has been truly heartening, and the passion for our community is evident. I have intently observed as our teams—with renewed energy and creative spirit—have participated in the development of innovative programs and initiatives for improving our variety of services, skills and talents, and infrastructure. Some outstanding examples of this progress are shared in this newsletter. All of this has been accomplished while maintaining our hallmark of providing compassionate, quality care.

In this issue, we share examples of MedStar Montgomery innovation and technology and stories of compassionate care and resilience.

You will find inspiration, as I did, in the work of Ngozi Wexler, MD, vice president of Medical Affairs and chief medical officer at MedStar Montgomery, who implemented the Bloodless Medicine initiative—a program that has served MedStar Health hospitals for many years—for the benefit of our local community. The

program ensures that all patients, regardless of religious affiliation or preference, have autonomy and support in their healthcare options and decisions, leading to stronger patient outcomes.

I commend our cardiology and imaging teams for working together with great synergy to equip patients like Lisa Raines with the information needed to manage their cardiovascular health.

The specialized services we provide come into focus again with Rodney Eng, who underwent an advanced-technique anterior hip replacement surgery, which resulted in a rapid recovery and relief from pain.

True excellence comes not from predicting challenges, but from meeting them with determination, grace, and adaptability when they are least expected. Our commitment to our incredible community is that we will do just that as we continue to innovate with a clear, patient-first goal in mind.

I am honored to be part of the MedStar Montgomery team and look forward to sharing with you what lies ahead.

Yours in good health,

**Emily Briton**  
President, MedStar Montgomery Medical Center,  
Senior Vice President, MedStar Health

## Focused On You

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Cover photo by  
**Hilary Schwab**

In these pages,  
we highlight the  
collaborative  
relationships between  
our care teams and  
patients, and our  
shared commitment to  
prioritizing health.

# Bloodless Medicine and Surgery program expands options for lifesaving care.

By Susan Walker

## When you first hear it, the term bloodless medicine and surgery might seem confusing. How can doctors perform surgery without blood being involved?

Bloodless medicine is a set of evidence-based strategies that enable healthcare providers to treat patients safely and effectively without transfusions that use donated blood or donated blood products. This approach focuses on using medication, surgical and anesthesia techniques, and strategic planning to minimize blood loss, make sure tissues in the body receive enough oxygen, and manage anemia (low red blood cell production). The goal is to provide the best care possible when transfusion with donated blood is not an option.

Bloodless medicine and surgery is an important specialty for people who, for religious, personal, or medical reasons, do not want to accept all or some forms of blood products. Jehovah's Witnesses are among the largest groups of people who seek bloodless medicine. Others who choose not to receive blood or blood products during treatment include people with allergies to blood products.

**"The foundation of the Bloodless Medicine and Surgery program is clear communication with providers and patients."**

—Ngozi Wexler, MD, MPH, FACOG

MedStar Health leads the way in this specialty, offering care to patients and training other healthcare providers across the country in the field. The Bloodless Medicine and Surgery program is now available at MedStar Montgomery Medical Center 24/7, ensuring that patients have access to lifesaving care that aligns with their beliefs and medical needs.

"It's very important the care team understands each patient's wishes and to what degree they would or would not accept blood products," explains Ngozi Wexler, MD, vice president of Medical Affairs and chief medical officer at MedStar Montgomery. "The foundation of the Bloodless Medicine and Surgery program is clear communication with providers and patients. We take the time to talk with each patient and educate them about all the different types of blood products and procedures, like dialysis. We also ensure that every member of the care team is aware of the

**The program offers the full spectrum of bloodless medicine approaches, including:**

- **Surgical procedures** like minimally invasive laparoscopic surgeries that focus on reducing blood loss and eliminating the use of transfusions of donated blood, as well as the use of lasers and electrocautery to promote blood clotting and seal vessels at a surgical site
- **Medications** that decrease bleeding, promote blood clotting, and increase the production of red blood cells and blood volume
- **Alternatives to transfusions with donated blood**, like autologous blood salvage (the patient's own blood is recovered and re-infused during surgery) and autologous blood donation (the patient's blood is collected before a scheduled surgery)

patient's wishes and knows what proactive steps they can take to prevent or minimize bleeding during treatment."

Dick Verstraete, NP, is the linchpin of the Bloodless Medicine program. Every day, he reviews the medical records of all patients at MedStar Montgomery, checking to see if they've indicated that they do not want to receive any or some types of blood products. If the staff at MedStar Montgomery knows that a patient is a Jehovah's Witness, they reach out to the bloodless medicine team at MedStar Georgetown University Hospital, the program's home base, and ask them to connect via telemedicine with the patient or family to clarify whether they are willing to receive any blood products and, if so, which ones.

Dick also checks to make sure the patient's wishes are documented in the medical record and writes progress notes as the patient moves through treatment.



**Ngozi Wexler, MD, MPH, FACOG**

"The introduction of the Bloodless Medicine and Surgery program is one more way we ensure that we're respecting our patients' need for the autonomy to make their own medical decisions while providing alternative approaches that allow us to deliver lifesaving care," adds Dr. Wexler.

Visit [MedStarHealth.org/BloodlessMedicine](https://www.MedStarHealth.org/BloodlessMedicine) to learn more about the Bloodless Medicine program.



**After a test revealed she was at high risk for heart disease, Lisa Raines prioritizes her health. Walking with her dog, Cooper, helps.**

Photo by Hilary Schwab

## State-of-the-art screening provides a brighter picture of heart health.

By Emily Marrs

**Lisa Raines has always attended her annual doctor's appointments and kept up with recommended checks and screenings.**

Accustomed to feeling healthy and strong, she never thought twice about receiving test results. But when her primary care doctor told her she had a heart murmur during a yearly check-up in 2019, Lisa, age 56, knew it was time to take a closer look at her health. "I was so surprised," she says. "I never experienced any problems or pain."

She made an appointment with Estelle Jean, MD, FACC, a board-certified cardiologist with the MedStar Heart & Vascular Institute at MedStar Montgomery Medical Center. Dr. Jean discovered that a bicuspid aortic valve—a valve containing two flaps instead of the typical three—was the cause of Lisa's heart murmur.

"Given her diagnosis, bloodwork revealing elevated cholesterol levels, and a family history of high cholesterol and heart disease, we developed a care plan for Lisa that included serial echocardiograms and continued cholesterol monitoring at her annual check-ups," says Dr. Jean.

Over the course of three years, Dr. Jean kept a close watch on Lisa's high HDL and LDL levels (the ratio of high-density lipoprotein and low-density lipoprotein is key to tracking cholesterol in the body—see sidebar). But during a December 2022 appointment, Lisa's bloodwork revealed that her total cholesterol number was significantly elevated due to rising HDL and LDL levels.

"We decided to do a calcium score to better understand her risk for heart disease," Dr. Jean says. She notes that recent studies suggest that extremely high HDL cholesterol levels (above 100 mg/dL) may not provide

additional protection, as was formerly believed, and can increase the risk for heart disease. "Over time, calcium deposits can build up within a cholesterol plaque and cause hardening of the arteries. Because calcium is a bright substance, this screening test reveals whether there is significant plaque buildup in the heart."

**"Thanks to the attentive team of providers at MedStar Montgomery, I'm looking at my life more intently now."**

—Lisa Raines

Lisa chose to have the calcium scoring test at MedStar Montgomery, known for its world-class specialists and advanced care technologies. The painless, non-invasive procedure took less than 10 minutes and consisted of two specific scans: a CT scan without dye, and an ECG-gated CT scan, which captures images between heartbeats. Identifiable amounts of calcium buildup were then quantified into a number called the Agatston score to determine Lisa's risk for cardiovascular disease.

"A score of 0 Agatston units means there is no identifiable disease, less than 100 is considered mild, between 100-399 is moderate, and more than 400 is severe," Dr. Jean explains. The typical score for a woman Lisa's age is 0.



**Estelle Jean, MD**

"Once we got the calcium scoring results, Dr. Jean called me and said, 'This doesn't look good,'" Lisa says. A total calcium score of 538.8 ranked Lisa in the 99th percentile compared to her peers. And after accounting for race, gender, age, and family history, the score placed her in the highest risk category for heart disease.

"Getting those results was such a shock," she says. "I felt fine, I felt healthy. I would never have imagined something was wrong."

Dr. Jean started Lisa on a daily dose of baby aspirin and a statin therapy medication to mitigate her cholesterol levels. She also underwent a stress test for further evaluation of her plaque. The stress test results were normal, and since then, she has managed her condition using the conservative methods prescribed by Dr. Jean.

"I feel very fortunate that Dr. Jean was so thorough and recommended the calcium score test," says Lisa. "It's given me a new perspective, and it goes to show that you can look and feel great and still be dealing with a serious health issue."

Reflecting on her experience, Lisa is grateful for the high-quality, compassionate care she received at MedStar Montgomery. "This was the first real health issue I've ever had, and I'm really glad I was in the hands of such kind and skilled nurses, technicians, and physicians," she says.

Prioritizing small changes to her diet and exercise routines, Lisa has been walking her dog more frequently and is enjoying the extended time outdoors. She has no side effects from the medications, and she feels happy and well. "Thanks to the attentive team of providers at MedStar Montgomery, I'm looking at my life more intently now," she says.

## What is cholesterol?

Cholesterol, a fat-like substance that circulates in the blood, helps the body make cell membranes, hormones, and Vitamin D. There are two types of cholesterol: low-density lipoprotein (LDL) and high-density lipoprotein (HDL).

### LDL: "bad" cholesterol

LDL is considered the "bad" cholesterol, and doctors recommend that LDL levels be at or below 100 mg/dL. Elevated levels of LDL can cause plaque buildup along the inside of artery walls and can increase the risk of cardiovascular disease and stroke if the plaque builds up and limits blood flow.

### HDL: "good" cholesterol

HDL is deemed the "good" cholesterol because higher levels can be beneficial in protecting against plaque buildup and reducing the risk of heart attack and stroke. However, studies suggest that very high HDL levels should be monitored.

"HDL is the cholesterol molecule that brings the LDL back to the liver to be eliminated from the body," says Estelle Jean, MD, FACC, a board-certified cardiologist with the MedStar Heart & Vascular Institute at MedStar Montgomery Medical Center. "Emerging data from clinical trials indicates that significantly elevated levels of HDL can increase the risk of heart disease and stroke."

### What causes high LDL cholesterol?

Risk factors for high cholesterol include physical inactivity, poor diet, smoking and tobacco use, and family history of cardiovascular disease. Maintaining a healthy lifestyle, exercising, opting for a balanced diet, and monitoring total cholesterol levels—which involves having a small amount of blood drawn and sending that sample to a lab—can be effective in reducing the risk of heart disease.

Visit [MedStarHealth.org/CalciumScore](https://www.MedStarHealth.org/CalciumScore) to learn more, or to schedule an appointment with one of our specialists.

# Two days after hip replacement surgery, retired vet is walking tall, pain free.

By Karen Hansen

**Rodney Eng of Silver Spring, Maryland, believes the outcome of his total hip replacement surgery at MedStar Montgomery Medical Center—not to mention his speedy recovery—was nothing short of remarkable.**

"I'm beyond happy," he says.

"I had zero pain after surgery. I used a walker for two days, a cane for three, and by day five I was walking without a cane." On day six, the 75-year-old former U.S. Army paratrooper walked with a friend around the Leisure World condominium complex and scaled three flights of stairs. They were both amazed.

Rodney's orthopaedic surgeon, Surajudeen Bolarinwa, MD, is thrilled about Rodney's successful outcome, but not surprised. In fact, Dr. Bolarinwa says Rodney's swift recovery and restored mobility is typical, and he attributes it to the minimally invasive, direct anterior surgical technique that he uses on the majority of his hip replacement patients.

"When patients come for their follow-up two weeks after surgery, they usually walk in without a cane," says Dr. Bolarinwa. "That is the thing that still amazes me about this anterior procedure, how people can so quickly walk without any assistive device."

The direct anterior approach is a hip replacement technique in which a small incision is made in the *front* of the hip. According to Dr. Bolarinwa, "This is a minimally invasive surgery as it allows removal of the damaged or arthritic bone and implantation of the artificial hip joint—without the need to cut or reattach surrounding muscles, as is necessary with the standard posterior approach."

Dr. Bolarinwa goes on to explain that the approach means far less postoperative pain and a smaller scar (three or four inches versus eight to ten with the posterior approach). With no muscle detachment, there is less damage to heal, so patients are back on their feet sooner. At MedStar Montgomery, most anterior hip replacement patients are discharged the same day as their surgery.

Rodney worked in construction after serving in the Army airborne infantry as a paratrooper. He was fit until age 73, when he began experiencing hip pain due to



**Days after undergoing hip replacement surgery, Rodney Eng is pain free and happy, following a swift recovery.**

Photo by Hilary Schwab

osteoarthritis. Rodney avoided surgery for over a year, and sensing his reluctance, Dr. Bolarinwa first prescribed conservative, non-surgical treatments such as image-guided steroid injections into his hip joint and physical therapy.

"Dr. Bolarinwa gave me honest information and always said, 'The decision must be your own,'" Rodney says. Eventually, when the pain grew too intense, he was finally ready.

Looking back, Rodney admits that his "year of procrastination" dragged on because of his misperceptions. Apprehensive about having a long recuperation, he feared having a limp after the procedure.

Dr. Bolarinwa acknowledges that limping due to uneven leg length is a common complaint with the posterior approach, but is less likely with the anterior technique.

One year post-surgery, both surgical approaches have equally good outcomes. Though the anterior approach has many compelling short-term benefits, many patients still undergo the posterior procedure. The reason has to do with how technically demanding the anterior approach is. Only a small percentage of orthopaedic surgeons are qualified to perform the more complex anterior technique, which has a steep learning curve. Fortunately, members of the MedStar Montgomery community have both options available to them.



**Surajudeen Bolarinwa, MD**

Rodney's confidence in his team's ability was well-founded.

"Everybody at MedStar Montgomery was excellent. The preop nurses, anesthesiologist, phlebotomist, recovery nurses—they all get an A-plus. I give Dr. Bolarinwa an A-plus-plus-plus! As soon as I met him, I knew, 'This is the man I want to do my surgery.'"

Today, Rodney is enjoying life and exercises daily. Since the anterior approach presents less chance of dislocation, he has no physical restrictions. But Rodney laughs that "Dr. Bolarinwa did say, 'There's only one thing you cannot do: You can't jump out of an airplane.'"

He may have hung up his parachute years ago, but today, Rodney urges friends needing hip replacement surgery to take the plunge at MedStar Montgomery. "I wish I would've done it a year before I did it."

The orthopaedics team at MedStar Montgomery is part of the MedStar Orthopaedic Institute, with 50 orthopaedic surgeons and 18 locations throughout Maryland, Washington, D.C., and Virginia. Visit [MedStarOrthopaedicInstitute.org](http://MedStarOrthopaedicInstitute.org) for a complete listing of physicians and locations.

**"Everybody at MedStar Montgomery was excellent. The preop nurses, anesthesiologist, phlebotomist, recovery nurses—they all get an A-plus. I give Dr. Bolarinwa an A-plus-plus-plus!"**

—Rodney Eng

## Advantages of direct anterior hip replacement

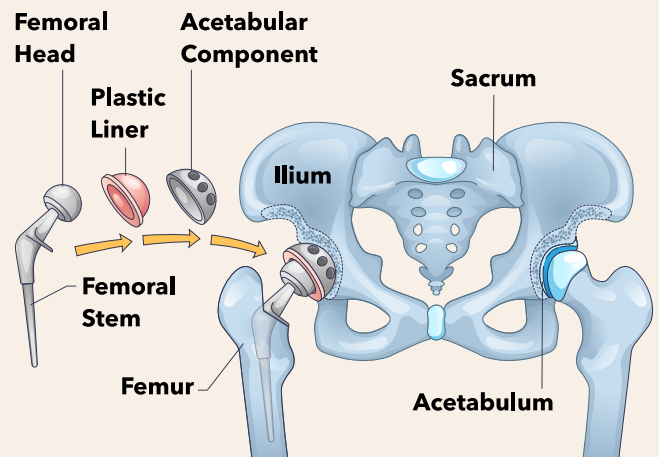
The direct anterior hip replacement technique is a minimally invasive procedure involving a small incision in the front of the hip. The procedure allows surgeons to remove damaged bone without cutting or reattaching surrounding muscles.

**Additional benefits** of this surgical technique include:

- Faster recovery and quicker return to activities than with other approaches
- Restored mobility
- Smaller incision site and less scarring compared to other surgical techniques
- Reduced postoperative pain

## Superior accuracy and precision

With anterior procedures, surgeons use a fluoroscope (a special X-ray machine) to visualize the hip, determine leg length in real time, and place the implant in the proper location. Being able to see and more accurately measure existing leg lengths enables the surgeon to adjust for discrepancies, by more precisely positioning the implant.



**At MedStar Montgomery, most patients who undergo direct anterior hip replacement are discharged the same day as their surgery.**

Visit [MedStarHealth.org/MMMCTotalHip](http://MedStarHealth.org/MMMCTotalHip) to schedule an appointment with one of our specialists.



**Gregory Brauer underwent a transcarotid artery revascularization (TCAR) procedure performed by Danielle Salazar, MD. The minimally invasive surgery technique lowered his risk of stroke.** Photo by Hilary Schwab

## Feeling fortunate: Minimally invasive procedure reduces risk of stroke.

By Ronna Borenstein

**Gregory Brauer knew he needed cataract surgery. What he didn't know was that he also had a life-threatening condition that can result in a debilitating stroke.**

The 69-year-old Laurel, Maryland, resident's medical journey began in late 2021 during a preoperative physical. "For most of my adult life I didn't get regular checkups because I felt fine," Greg explains. "But they discovered I had high blood pressure during an exam before my surgery and my doctor also heard a whooshing sound in the left carotid artery. He referred me to Danielle Salazar, MD, a vascular surgeon at MedStar Montgomery Medical Center."

After an ultrasound and other tests, another unpleasant finding surprised Greg. Dr. Salazar determined that the right carotid artery was significantly more blocked than the left, showing a greater than 70% stenosis, or narrowing. This was caused by a buildup of fatty deposits, known as atherosclerotic plaque, which can reduce blood flow to the brain and, if left untreated, lead to a stroke.

In May 2022, Dr. Salazar performed a carotid endarterectomy—an open surgery that removed the plaque. "Greg was an excellent candidate for the procedure because of his age and good cardiac health," she says. The surgery went well and Greg continued to see Dr. Salazar for routine surveillance. However, during a follow-up appointment in February 2023, her examination revealed that the carotid artery was again narrowed, indicating restenosis.

"Restenosis is not uncommon, but when it occurs within the first few years of the original surgery, it is usually a result of the artery wall thickening," says Dr. Salazar. "Reopening the initial incision would have put Greg at high risk for problems such as nerve injury, difficulty swallowing, wound closure complications, and heart attack. But he was an excellent candidate for a procedure called transcarotid artery revascularization (TCAR), which was approved by the FDA in 2015 for high-risk patients. High-risk in this case includes patients with a lesion or damaged tissue high in the neck; those with prior neck surgery, radiation in the neck, heart attacks or other cardiac problems; and patients older than 75."



## Study could expand access to TCAR for more patients with carotid disease

Transcarotid artery revascularization (TCAR) is currently indicated only for patients with carotid stenosis who are at high risk of complications from carotid endarterectomy (CE)—an open surgery procedure. But with benefits such as lower risk of stroke and nerve injury, could this minimally invasive technique become the recommended procedure for all patients with this diagnosis?

MedStar Montgomery Medical Center, one of only 60 sites nationally to be selected, is enrolling patients in a new research study to answer that question. This study will assess 400 patients who will be followed over time to observe their response to TCAR as a primary intervention. The study looks at three parameters—death, stroke, and myocardial infarction (heart attack)—in the first 30 days after the TCAR procedure and up to one year after.

“Excellent outcomes for high-risk surgical patients treated with TCAR are already well documented,” says MedStar Montgomery Site Director of Vascular Surgery Kyle

During TCAR, a stent is placed across the plaque lesion. To reduce the risk of stroke during the procedure, a filtering system reverses blood flow, preventing debris from the plaque from reaching the brain. Because of its smaller incision and less invasive approach, TCAR has many benefits: less risk of heart attack, lower rates of infection, faster healing, less discomfort, and quicker recovery. Greg welcomed this news.

“TCAR has changed the face of treatment options for patients with significant carotid stenosis,” says Dr. Salazar. “Based on the outcomes we are seeing with this procedure, I would not hesitate to recommend it for my patients and my own loved ones.”

A mechanical engineer for Bechtel, Greg is grateful that the MedStar Montgomery team has given him many more years to spend with his 13 grandchildren. “I feel very fortunate that the course of events worked out so well,” he says. “If not for the cataract surgery, I may have

**“Being able to have this state-of-the-art procedure so close to home greatly reduced my anxiety.”**

— Gregory Brauer

Reynolds, MD, the principal investigator for the study. “This research will determine the safety and efficacy of TCAR in patients with a standard or lower surgical risk.”

As part of the study, Dr. Reynolds explains the risks and benefits of open surgery and TCAR to each patient. If he thinks TCAR is the better alternative, even if the patient is not high risk, he offers them the opportunity to participate in the observational study approved by the FDA. The opportunity interests most patients and referring physicians.

“I am honored to be able to offer this study at MedStar Montgomery,” says Dr. Reynolds. “The results could change the narrative of how we treat carotid artery disease, identifying this less-invasive treatment as a standard of care or primary treatment option for a significant number of patients. Now participants in our area will have access to this technology in their own neighborhood.”

never known about the blockage until I had a stroke. And being able to have this state-of-the-art procedure so close to home greatly reduced my anxiety.”

Greg’s words of advice: “Have regular checkups, even if you feel great. Otherwise, you may not know you have a serious medical condition until it’s too late.”

*Dr. Salazar is a board-certified vascular surgeon who sees patients at MedStar Montgomery Medical Center and in our office in Frederick, Maryland.*



**Monitoring Greg’s cardiac health, Dr. Salazar determined he was a good candidate for the TCAR procedure.**

Photo by Hilary Schwab

Visit [MedStarHealth.org/TCAR](https://www.MedStarHealth.org/TCAR) to learn more or to schedule an appointment with one of our specialists.

# Online classes and support groups.

MedStar Montgomery Medical Center offers a wide range of classes and support groups to help you on your journey to wellness. Some classes are currently virtual. For specific dates and times, when not listed below, please visit [MedStarHealth.org/Classes](https://www.MedStarHealth.org/Classes).

## Cancer support

### Support Group for Cancer Survivors

This patient support group provides a safe place to share encouragement and receive information and guidance while discussing the unique challenges of living with a cancer diagnosis. Free. *Meets the first Friday of every month, noon to 1 p.m.*

### Support Group for Caregivers

This group aims to provide both practical and emotional support to caregivers. We will explore ways to support your loved ones while practicing self-care. Learn about resources and ways to deal with the challenging and rewarding aspects of caregiving. Free. *Meets the second Friday of every month, noon to 1 p.m.*

### Gentle Yoga

Yoga classes are tailored to meet cancer survivors' needs at all stages of treatment and recovery. Classes combine guided breathing exercises, slow stretches, and special yoga sequences to improve balance, strength, and flexibility. Free. *Wednesdays, 10:30 to 11:30 a.m.*

To register for support or yoga classes, contact Samantha Falzoi at [samantha.w.falzoi@medstar.net](mailto:samantha.w.falzoi@medstar.net) or call **301-570-7878**.



## Childbirth and parenting classes

### Complete Childbirth Preparation

This six-week program prepares expecting parents for a positive birthing experience. The program covers labor, delivery, the birth process, and caring for a newborn. It includes the Infant Feeding class and Infant Care class.

Fee: **\$150**. *Six-week program, 7:30 to 9:30 p.m. Call for dates.*

### Childbirth Express

This one-day condensed course will prepare couples for a positive birthing experience. The course covers labor, delivery, and the birth process. Fee: **\$75**.

### Lamaze Technique

Learn about breathing patterns, position changes, and relaxation techniques to find comfort during labor. This class is for those who have received childbirth education before or need a refresher for the next labor and delivery. Fee: **\$60**.

### Infant Care

This class is designed to give a complete head-to-toe look at how to care for your little one and provide you with hands-on experience. Topics include bathing, feeding, diapering, safety issues, and much more. Fee: **\$35**.

### Infant Feeding

This interactive class aims to instill confidence in you on your feeding journey with your newborn, whether you are breastfeeding or bottle-feeding.

Topics include the biology of the breast and breast milk, starting techniques, pumping, hand-expressing milk, bottle-feeding, and formula information. Fee: **\$35**.

## Support groups

### Infant Feeding/New Mom Support Group

This group is for new moms so they can get answers to their questions about breastfeeding, including whether baby is getting enough, nighttime feedings, pumping and storing milk, and returning to work while continuing breastfeeding. Free. *Meets every Thursday.*

### Weight Loss Support Group

This group is designed to provide a supportive space for individuals who have had weight loss surgery, those who are thinking about or planning to have weight loss surgery, or those who want to get back on track with their weight loss journey. Free. *Second and fourth Monday, 7 to 8 p.m.*

### Diabetes Self Management Support Class

A group for people diagnosed with Type 1 and Type 2 diabetes or those who have pre-diabetes. Learn about knowing and controlling your hemoglobin, A1C, blood pressure, and cholesterol; glucose monitoring; medication management; and healthy nutrition. **Virtual. Free.** *Three-Class series, 10 to 11 a.m.*



Some classes are virtual. For full descriptions, or to learn more about dates and times, visit [MedStarHealth.org/Classes](https://www.MedStarHealth.org/Classes) or call **301-774-8881**, option 4.

# Compassionate care when it absolutely mattered most.

By Emily Marrs

## When Robert “Bob” Tettelbach was first admitted to the Addiction and Mental Health Center at MedStar Montgomery Medical Center seven years ago, he was suicidal and in dire need of support.

Fortunately, Bob, a retired Air Force lieutenant colonel, found encouragement in the caring physicians and staff at the center. They left a lasting impression on him. During his three inpatient experiences, Bob participated in the center’s programs, including cognitive behavioral sessions and group therapy discussions. He credits these services for his successful transition back to life at home.



“The therapists I worked with were knowledgeable and passionate about what they do,” he says. “I grew so much through their expertise.” Uplifted by the benevolence of those at the Addiction and Mental Health Center, Bob felt inspired to give back to the community that helped him when he needed it most.

**Bob Tettelbach**

**“I’m here today because of the extraordinarily caring team at MedStar Montgomery.”**

– Bob Tettelbach

“I’ve been so heartened by the care I received from such compassionate therapists, and I wanted to do something to return the favor,” he says.

As a gesture of his gratitude, Bob made philanthropic gifts to the Oncology Department at MedStar Montgomery—in honor of his wife Ellen, who passed away in 2021—and to both the inpatient and outpatient programs at the Addiction and Mental Health Center. Bob has since joined the hospital’s Philanthropy Committee and continues to be involved. He volunteers for the Montgomery County affiliate of the National Alliance on Mental Illness (NAMI) and serves as committee chairman for the NAMIWalks Montgomery County fundraiser.

“Bob has become a leader in the community by taking strides to destigmatize mental health,” says Claire Meltzer, philanthropy officer at MedStar Montgomery. “We’re working together on breaking barriers to accessing care and spreading awareness of the great resources we have here for the community.”

Bob says he will always remember the support he received from his providers at the Addiction and Mental Health Center. “I’m here today because of the extraordinarily caring team at MedStar Montgomery,” he says.

To share gratitude for a caregiver or friend who may have changed your life, please contact Claire Meltzer at [claire.j.meltzer@medstar.net](mailto:claire.j.meltzer@medstar.net) or call **301-774-8622**.

## Demonstrating excellence with advanced certification as a primary stroke center



The American Heart Association recognized MedStar Montgomery Medical Center for the 2023 Get With The Guidelines - Stroke Gold Plus; Target: Stroke Honor Roll Elite; and Target: Type 2 Diabetes Honor Roll awards.

These programs demonstrate our commitment to ensuring stroke patients receive the most appropriate treatment according to nationally recognized, research-based guidelines.



**Roslyn Katz, MSN, RN, CEN**

When a stroke occurs, time is of the essence in making sure patients receive immediate care to treat medical complications and minimize brain injury.

At MedStar Montgomery, Stroke Coordinator Roslyn Katz, MSN, RN, CEN, works with our staff to manage patient care and ensure optimal outcomes.

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## Spotlight on our providers.



**Daniel Felbaum, MD**  
Neurosurgery

202-877-5026



**M. Nathan Nair, MD**  
Neurosurgery

202-444-4972



**Robert Mason, MD**  
Neurosurgery

202-877-5026



**Chad Simmons, PA-C**  
Neurosurgery

301-570-8554



**Kurtis Bertram, DPM**  
Foot and Ankle  
Surgery, Podiatry

202-877-6640

To make an appointment with one of our specialists, call the individual numbers provided.

**It's how we treat people.**

