Advancing bariatric surgery with robotics

Pediatric specialty care  I  Colorectal cancer prevention  
Pulmonary rehabilitation  I  Healthy food pantry benefits community
Letter from the president

Dear friends,

Spring is a time of hope and renewal. It is inspiring to see the earth around us reawaken as the sun shines brighter and the temperatures rise. As I watch this transformation, I can’t help but to think of the growth happening every day at our hospital. We are continually adding new physicians, services, and initiatives to help grow a healthier future for our community. As we add new programs, it is exciting to watch them evolve and see the results. Our bariatric surgery program is a wonderful example of this. Established six years ago it continues to thrive, offering what can be life-changing procedures for many, including Shirley Robinson, who you will read about in this edition. Shirley had surgery in October 2022 and is amazed and excited about the changes she is seeing in her weight and overall health.

Another program that continues to expand is our GI or gastroenterology program. With the addition of Mark Real, MD, to our Leonardtown office, patients can receive more advanced diagnostic procedures at our hospital, close to their homes. With March being Colorectal Cancer Awareness Month, our GI providers want to remind everyone to speak with their medical provider about their risks and whether or not they should be screened for colon cancer. Early detection is the key to treating this disease successfully. Spring is also the time of year we celebrate our medical staff by honoring them on National Doctors’ Day, March 30. Our providers work tirelessly every day to care for their patients and we are grateful for their commitment to our hospital and community. We look forward to continuing to grow together.

I hope this spring fills you with anticipation as we look forward to the rest of 2023. I know everyone at our hospital is excited for what is to come, not just at our hospital but in our community as well.

Mimi Novello, MD, MBA, FACEP
President and Chief Medical Officer
MedStar St. Mary’s Hospital

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With very little pain, Shirley returned home to begin the next phase of her journey—learning to live and how to manage her food choices following surgery. Shirley had to portion out her meals and eat very small amounts in order to accommodate her much smaller stomach.

“We use the daVinci surgical robot for nearly all of our bariatric surgery procedures which translates to smaller incisions and a quicker recovery time,” said Dr. Alrefai. “The procedure Shirley had reduced the size of the stomach and reconnects the small intestine to the smaller stomach, bypassing the original stomach and several feet of the small intestine. Pre-surgical nutritional classes coach patients how to adapt with the changes of how their body absorbs and processes food.”

“When you go through the nutrition classes, they tell you what’s going to happen, but I don’t think I was really prepared for how drastic the change is,” said Shirley. “But if you are up for the challenge, it’s not as hard, and Dr. Alrefai was so knowledgeable and personable; everyone I have worked with before and after the surgery has been great.”

Shirley quickly saw changes as the weeks passed and by January, she had lost 50 pounds. “Now, I realize my weight was affecting me more than I thought it was—I can move easier, I am not as tired, and I have more energy,” said Shirley. And those health conditions she was facing? “My blood sugar has dropped five points and is now at the normal range, and my cholesterol and blood pressure have improved.” Although she has seen tremendous change in her weight, body, and health, Shirley has not yet celebrated by shopping for smaller clothes. “I’m still riding that high of putting the clothes on and having to squeeze the belt tightly because the pants are so big,” said Shirley. “That’s a bigger ego boost than putting on a smaller pair of pants.”

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Bariatric surgery roadmap: What to expect

Visit MedStarHealth.org/BariatricSurgery to take an online seminar. It can take anywhere from three to six months to complete the necessary steps prior to surgery depending on your insurance provider’s requirements.

1. Schedule an initial patient consultation with the surgeon
   - The surgeon will discuss which procedure is right for you.
   - After your consultation, you will complete a nutrition assessment with a dietitian and a psychosocial evaluation with a mental health professional. Referrals will be sent for you, but you must make your appointments. Some insurances require a referral from the primary care physician’s office.

2. Acquire insurance approval
   - MedStar St. Mary’s will compile your records and submit to your insurance company for the initial approval, which may take up to 30 days.

3. Schedule your surgery date
   - You will be contacted when approval is received.

4. Complete a pre-operative clinic visit several weeks prior to your surgery date
   - You will be contacted to schedule this when approval is received.

5. Surgery day!
   - The scheduling office will call you in advance to provide more details about your procedure.
   - You will report to the hospital about two hours before your scheduled time.
   - Your hospital stay will be approximately two days.
   - You must have prior arrangements for transportation home and an adequate care-giving plan for your first days at home.

6. Follow up for LIFE
   - Because this is a PROGRAM and not just a procedure, we expect to have a lifelong relationship with you. We look forward to working with you and watching your weight loss progress.
   - Attending follow-up visits is critical to a successful outcome.
   - After the first year post-surgery, patients will schedule annual follow-ups.

It is highly recommended patients contact their insurance provider before starting these steps to clarify if weight loss surgery is a covered benefit under their policy and the surgery can be performed at MedStar St. Mary’s Hospital.

Meet our bariatric team

The MedStar St. Mary’s Hospital bariatric team pictured from left to right, back row: Melissa Ward, medical assistant; Tiffany Thomas, patient service coordinator; Heather O’Brien, patient service coordinator; Shameka Butler, medical assistant; and Julie Compher, practice manager. Seated in the front row are Katelynn Edinger MSN, APRN, FNP-BC, and bariatric surgeon Sameer Alrefai, MD, FACS.

MedStar St. Mary’s Hospital’s is now the only nationally accredited bariatric surgery program in the Southern Maryland region.

MedStar St. Mary’s achieves accreditation from the Metabolic and Bariatric Surgery Accreditation and Quality Improvement Program®. Meeting the highest standards for patient safety and quality, the MedStar St. Mary’s bariatric surgery center received accreditation as a Comprehensive Center by the Metabolic and Bariatric Surgery Accreditation and Quality Improvement Program (MBSAQIP®), a joint Quality Program of the American College of Surgeons (ACS) and the American Society for Metabolic and Bariatric Surgery (ASMB). The MBSAQIP standards ensure that metabolic and bariatric patients receive comprehensive medical care from a team of expert providers, which improves patient outcomes and long-term success.

MBSAQIP-accredited centers offer preoperative and postoperative care designed specifically for patients with obesity. Many insurance companies will only cover bariatric surgery at centers with MBSAQIP® accreditation.

To earn accreditation, MedStar St. Mary’s met essential criteria for staffing, training, facility infrastructure, and patient care pathways, ensuring its ability to support patients with obesity. “MBSAQIP-accredited centers ensure patients receive the highest level of care,” said Dr. Alrefai. “Our bariatric program at MedStar St. Mary’s is committed to patient safety and surgical excellence by trained staff and a dedicated team throughout your weight loss journey.”
Battery low: Helping our kids to power up beyond screens

For many modern parents, it’s a familiar fight: urging their kids to disengage from screens and digital media when there’s always “one more video” to watch. Rarely is the fight more exhausting than at bedtime, when both the devices and children need recharging.

All children and teens need adequate sleep (8-12 hours daily, depending on age), physical activity (1 hour), and time away from media, according to the American Academy of Pediatrics (AAP). Too much media use can lead to sleep problems, mood or weight issues, and less time learning other ways to relax and have fun, among other concerns.

But when the dreaded “power down” hour arrives, prying controllers from sticky fingers often starts a battle.

“Consistency is what’s so important there, along with schedules and boundaries,” said Bethany J. God, MD, pediatrician with MedStar Medical Group Primary Care at Great Mills. “If we say all devices must turn off at 7 p.m., or after an hour of use, stick to the schedule and follow through.”

Guidelines on how long to engage with devices is the subject of frequent debate—just ask any mom or dad on the playground. For children ages 2-5, the AAP currently recommends limiting non-educational screen time to about 1 hour per day. For children ages 6-12, the AAP recommends 1-2 hours per day. For teenagers, the AAP recommends that screen time occupies no more than 1 hour before bedtime. Be firm on allowing screen time only after chores, schoolwork, or other responsibilities have been met.

Consider these tips to help manage kids’ media use, plus encourage IRL fun:

- Set limits, especially on weekdays. Be clear about how long kids can engage with media and when it will turn off. Set up time limits on devices and enforce them.
- Keep screens out of kids’ bedrooms as much as possible. Try to unplug at least an hour before bedtime.
- Make meals device-free zones—for adults, too. Encourage family conversation without the thum of YouTube.
- Offer fun alternatives. Entice kids to power down by offering to go for a walk, starting a board game, having a dance party, or helping prep meals, for example.
- Treat screens as a privilege, not a right. Be firm on allowing screen time only after chores, schoolwork, or other responsibilities have been met.
- Check into their worlds. Follow their favorite YouTubers, download their must-play apps, join them in their Minecraft realms. In addition to ensuring the content is appropriate, you’ll engage with them on their level (and might have fun, too). And if you do see anything objectionable, you can act quickly and start important conversations around what they’re seeing.
- Set a good example. Unplug more! Observing adults constantly on their devices reinforces the behavior as normal. Enjoy a screen-free breather. Bonus points for inviting Mother Nature along.
- Be firm on allowing screen time only after chores, schoolwork, or other responsibilities have been met.
- Develop a customizable plan to help set priorities with your children and make the most of your family time. Scan this QR code to get started.

Meet Bethany J. God, MD
Board-certified pediatrician
Dr. Bethany God sees patients as newborns through age 17. In addition to general pediatrics, Dr. God has a special interest in attention deficit hyperactivity disorder (ADHD), medically complex children, and preventative medicine. She looks forward to partnering with patients at East Run Center to care for growing children and support families through the adventures of parenthood.

MedStar Medical Group
Primary Care at Great Mills
45870 East Run Drive
Lexington Park, MD
P 240-895-8600

Developing healthy media habits

When children are referred to a specialist, parents don’t want a long wait for appointments—or a stressful drive into the city. Our pediatric providers at MedStar Health Specialists at Charlotte Hall offer convenient, quality care to children and families in Southern Maryland, with resources to help them grow and play to the fullest.

Accessing specialized care shouldn’t require a day trip.

Meet Bethany J. God, MD

P 202-476-2090
Treats conditions including congenital heart disease, arrhythmias (abnormal heart rhythms)

Eugenia Gourgari, MD
Pediatric endocrinology, MedStar Health
P 202-243-3499
Treats conditions including diabetes and adrenal, metabolic, thyroid, and growth disorders

Paola Pergami, MD
Pediatric neurology, MedStar Health
P 202-243-3560
Treats conditions including epilepsy, pediatric stroke, muscle weakness, and traumatic brain injury

Gurpreet Singh Phull, MD
Pediatric pulmonology, MedStar Health
P 202-243-3560
Treats conditions including asthma, sleep disorders, infectious lung disorders, cystic fibrosis, congenital lung malformations, and pulmonary function testing
Palliative care team supports patients, families with serious illnesses

Join us in welcoming our newest providers in palliative care at MedStar St. Mary's Hospital.

**Luke Powell, MD**
Dr. Luke Powell is a graduate of Georgetown University School of Medicine. He completed his residency in Family and Community Medicine at New York Presbyterian-Columbia University Irving Medical Center and fellowship in Hospice and Palliative Medicine at New York University Medical Center. He is board certified by the American Board of Family Medicine.

“Palliative care means taking a step back—to not just focus on the ups and downs of day-to-day care, but think about the values that are important to the patient,” said Dr. Powell. “Palliative care helps with the big picture of the person’s life to address not only their medical and physical needs, but also their needs psychologically, socially, and spiritually.”

**Kristin Forner, MD, FAAHPM**
Dr. Kristin Forner serves as regional palliative care program director for MedStar St. Mary’s Hospital and MedStar Southern Maryland Hospital Center. She holds board certifications in Hospice & Palliative Medicine and Anesthesiology from the American Board of Anesthesiology. Dr. Forner is a graduate of University of Chicago Pritzker School of Medicine, completing her residency at Massachusetts General Hospital and fellowship at Scripps Mercy Hospital. She is a Fellow of the American Academy of Hospice and Palliative Medicine (FAAHPM).

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**Celebrate our medical staff on March 30**

Giving our best through life’s challenges and joys—our medical providers go the distance for their patients and our community. On Doctors’ Day, March 30, we celebrate them for their commitment to caring for their patients with expertise, compassion, and respect.

Join us in extending a camaraderie—real or virtual—to a medical provider who has made a difference in your life. Go to MedStarHealth.org/Philanthropy to express your gratitude and share a care experience with us.

The Medical Staff of MedStar St. Mary’s Hospital is now led by Yahia Tagouri, MD, chief of staff, pictured center; Nyles Burton, MD, vice chief, pictured right; and Floyd Howell, MD, secretary/treasurer, on left.

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**What is palliative care?**

Palliative care is specialized medical treatment for people living with a serious illness, focused on providing symptom relief and alleviating stress.

While it is often coupled with hospice care, they are distinct, though with a similar goal to improve quality of life. Palliative care is an extra layer of support often provided alongside curative treatments.

“This is not end-of-life care,” explained Dr. Powell. “Patients at any stage of illness, including those who will ultimately be cured, can benefit from palliative care.”

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**Extending the reach of the critical care physician**

Physician assistants provide extra level of care for critically ill patients

Critical care physicians are highly trained in specialized procedures often needed to be performed on very ill patients. It is a role that takes skill, knowledge, and an infinite level of compassion. Often referred to as intensivists, these physicians have advanced training in treating patients who suffer from conditions such as serious infections, heart problems, and lung issues that may require ventilator support. Many life-saving battles were fought in the Intensive Care Center (ICC) during the COVID-19 pandemic with critically ill patients needing complex, around-the-clock care.

MedStar St. Mary’s Hospital’s ICC is using innovative approaches to ensure the best care possible for patients in the ICC. A team approach that puts skilled physician assistants (PAs) at the bedside is helping to expand the reach of the ICC intensivist.

“We have added four physician assistants to our ICC medical staff, allowing us to provide a higher level of care to our critically ill patients,” said Jean-Pierre El Khoury, MD, MS, medical director of the MedStar St. Mary’s ICC. “With an aging population and the pandemic, the demand on the critical care physicians has increased.”

The PA-intensivist team is an efficient care delivery model that helps us provide more consistent round-the-clock care, which ultimately results in better outcomes for our patients and reduces the stress on our ICC staff.

Kimberlie Stickney, PA, chief Physician Assistant for MedStar St. Mary’s Intensive Care Center, prepares to participate in rounding to discuss patient care.

David Alpert, PA
Edie Lockner, PA
Erica Winter, PA

ICC has increased and implementing this team approach allows us to cover more patients with greater efficiency.

PAs practice under the supervision of physicians. They earn a master’s degree and are licensed by state boards to practice medicine. They can diagnose illnesses, manage treatment plans, prescribe medications, and coordinate discussion with family members and caregivers.

“Our PAs are an important part of a multidisciplinary team developing care plans by working with other departments such as respiratory therapy, pharmacy, nutrition support, and nursing,” said Dr. El Khoury. “The PA-intensivist team is a more efficient care delivery model that helps us provide more consistent round-the-clock care, which ultimately results in better outcomes for our patients and reduces the stress on our ICC staff.”

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Jean-Pierre El Khoury, MD, MS, medical director of the MedStar St. Mary’s ICC.
New technology to diagnose, treat GI issues close to home

Finding the cause of persistent or severe gastrointestinal (GI) discomfort requires a clear view. Patients have a new local resource for answers through specialist Mark Real, MD, who joins Anand Nath, MD at MedStar Medical Group Gastroenterology at St. Mary’s.

Dr. Real diagnoses and treats multiple GI conditions. He also performs advanced procedures, such as endoscopic retrograde cholangiopancreatography (ERCP), at MedStar St. Mary’s. ERCP is a procedure that combines fluoroscopic X-ray imaging with the use of an endoscope camera. With the injection of contrast dye, Dr. Real can closely examine the liver, bile ducts, and pancreas for blockages, stones, abnormal ducts, leaks, and tumors.

“ERCP is an important tool in the diagnosis and treatment of several biliary and pancreatic diseases, ranging from bile duct stones to pancreatic cancer,” said Dr. Real. “I am excited to bring this advanced procedure to MedStar St. Mary’s Hospital, allowing people to access specialized care within their own community.”

A graduate of Georgetown University School of Medicine, Dr. Real completed his residency in internal medicine and fellowships in gastroenterology and advanced endoscopy at MedStar Georgetown University Hospital. He specializes in advanced endoscopic procedures, including ERCP, and is board certified in internal medicine and gastroenterology.

Q. Should I be screened for colorectal cancer even if I have no symptoms?
A. Yes. National guidelines for adults at average risk were changed in 2020 to begin screenings at age 45 (lowered from age 50). Screenings should start earlier for people at higher risk. A colon polyp found during a screening can be benign or precancerous; over time, the latter can become cancer. Most polyps—and sometimes even early cancer—do not cause any symptoms, so it is important to screen and, if necessary, treat these in a timely manner.

Q. Is there any way to decrease my risk of developing colorectal cancer?
A. For those at average risk, the major determinants for colon polyp/cancer development are aging and genetics—neither of which we can control. However, there is some evidence to suggest lifestyle factors may play a role in colon cancer risk. In my opinion, maintaining a healthy weight, avoiding excessive processed foods or red meat, abstaining from smoking nicotine, and avoiding excessive alcohol intake may help decrease one’s risk of developing colon cancer.

Q. Are there any alternatives to the colonoscopy for colorectal screenings?
A. The colonoscopy remains the gold standard screening tool. However, at-home stool sample kits have been gaining in popularity and can provide important information for those at average risk. Stool sample kits can be highly sensitive for blood, or both blood and abnormal DNA. While not first choice, imaging or lab tests could also be considered on a case-by-case basis. The most important thing is to get screened, irrespective of method.

Q. I want to get a screening colonoscopy but am anxious about the preparation. What can I expect?
A. The procedure itself is routinely done under anesthesia and is not uncomfortable for most patients, with very low complication rates. The challenging part is often the “bowel prep” process. I cannot over-emphasize the importance of adequate bowel preparation—it allows for better viewing and accuracy, and decreases complication risks. In general, prep involves avoiding high-fiber foods for a few days followed by laxatives to clean out the colon and clear the body of stomach and bile acids. With patience and motivation, almost every patient is able to complete this successfully, and the temporary inconvenience is well worth the potentially life-saving benefits.

Searching around every bend.

Get it on the books: Colorectal screenings save lives

Are you at a risk of colorectal cancer? If you’re an adult human, the answer is yes.

Colorectal cancer is the third most common cancer diagnosed in the U.S., and the second leading cause of cancer death. The good news: regular screenings help catch concerns early, when growths—called polyps—are easiest to treat. But in order to be life-saving, the screening must actually take place. Gastroenterologist Anand Nath, MD, is on a mission to make that happen. Here, he breaks down some facts and helpful tips around screenings in honor of Colorectal Cancer Awareness Month this March.

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A trip to a nearby Emergency Department in August 2022 started Beth Ramsey’s incredible story of recovery from a rare and often fatal heart condition. A five-month journey would bring her to MedStar St. Mary’s Hospital for follow-up care in the Grace Anne Dorney Pulmonary & Cardiac Rehabilitation Center.

Healing with heart

Giant cell myocarditis is a very rare often fatal inflammation of the heart muscle. It is a condition that damaged the heart of Beth Ramsey so severely, she went from living a healthy active lifestyle to being placed on a heart transplant list in a matter of days.

In July 2022, Beth Ramsey was hiking in Iceland with her daughter. An elementary school principal, Beth took no medications and had no prior history of heart issues.

“One Aug. 6, I drove myself to the Emergency Room thinking I had bronchitis,” said the 59-year-old Charlotte Hall, Maryland, resident. “They did an EKG and put me in a helicopter saying I was having a heart attack.”

Beth was flown to MedStar Washington Hospital Center where more tests were performed. The results showed that Beth’s heart attack-like symptoms were being caused by giant cell myocarditis.

“I had a very full career and life,” said Beth. “I went from Aug. 5 having no medical history of heart issues to Aug. 6 being told I needed a heart transplant.”

Beth remained at MedStar Washington Hospital Center for two months, undergoing testing and preparations for the transplant. By the time she was placed on the transplant list, she was on life support because she was so ill.

“Doctors told me I wasn’t going to live three more days, but because of the type of life support I was on, I jumped to the top of the list,” Beth said.

On Aug. 20, 2022, Beth received her new heart, but her journey to recovery was only just beginning.

“Because I was immobile from Aug. 6 to Aug. 24 and I was on life support, some of the machines caused nerve damage to my left leg. Coming out of this, I had a new heart, but I couldn’t walk,” said Beth.

On Oct. 4, 2022, Beth was released from the hospital, but she still needed lots of support.

“The physical therapist, occupational therapist, and visiting nurse came a couple of times a week,” said Beth. “I had lots of in-home support which was amazing.”

In December 2022, Beth was finally strong enough to begin her next phase of recovery at the Grace Anne Dorney Pulmonary & Cardiac Rehabilitation Center at MedStar St. Mary’s Hospital. Beth admits she was a little nervous starting the cardiac rehabilitation program.

“I am constantly nervous because I don’t think there are a lot of people that have been through this, certainly not at my age or in St. Mary’s County,” said Beth. “I was immediately put at ease because of the staff’s confidence, their expertise, and their positive attitude.”

Beth began the exercise program under the direction of the GADC team. While exercising, the staff monitors Beth’s heart rate and helped her determine how to safely increase her efforts. They have also helped her focus on strengthening her leg.

“It helps me knowing I have the support there to tell me, ‘You’re doing great, keep going, you know this is a good heart rate for you, you know you can increase the weight,’” said Beth. “It gives me great confidence to be able to live my life outside of cardiac rehab, just to know how far I can push myself.”

During her recovery, Beth has gone from using a wheelchair, to walking with a cane, to walking without help. She walks daily and hopes to be back on her bicycle and paddle board this spring. “Beth has been very consistent in attending cardiac rehab,” said James A. Farrar, MS, EPC, CNC, CES, clinical lead-clinical exercise physiologist with the GADC. “She asks questions on what she can do to improve her recovery. She shows a strong commitment by coming in with a positive mindset and has developed a great working relationship with our staff. She takes our recommendations seriously and wants to be successful. She is a role model to other patients with her determination.”

“The Grace Anne Dorney Center has given me so much support and I still have questions about what my life going to be like,” said Beth. “I just want to be as close to my 100% before this as possible, and the staff is giving me every reason to believe that I can achieve that.”

The Grace Anne Dorney Pulmonary & Cardiac Rehabilitation Center at MedStar St. Mary’s Hospital

The Grace Anne Dorney Center offers supervised rehabilitation programs for patients who are under the medical management of a physician for cardiac or pulmonary conditions.

- Pulmonary patients have moderate to severe COPD or another significant pulmonary disease.
- Cardiac patients have typically just had a heart attack or cardiac surgery within the past six months to a year, or have other qualifying diagnoses.

The Grace Anne Dorney Center program includes individualized assessments and care plans. Participants attend two rehab sessions per week for about 18 weeks.

“Consistency is the key to recovery,” said James A. Farrar, MS, EPC, CNC, CES, clinical lead-clinical exercise physiologist with the GADC. “Being consistent with your efforts such as being physically active and maintaining healthy lifestyle changes is how patients will get the most benefit from the program.”

A physician’s order is required before participating in these programs and most insurances and Medicare will cover these services.

Grace Anne Dorney Pulmonary & Cardiac Rehabilitation Center

Call 240-434-7143 for more information. A doctor’s referral is required.

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The Grace Anne Dorney Pulmonary & Cardiac Rehabilitation Center at MedStar St. Mary’s Hospital

After being diagnosed with a rare heart condition and receiving a heart transplant in 2022, Beth Ramsey has declared 2023 “The Year of Beth” as she continues on her road to recovery. Helping Beth on this journey are James Farrar, MS, EPC, CNC, CES, and Lesley Johnson, MS, of the Grace Anne Dorney Pulmonary & Cardiac Rehabilitation Center.
Volunteerism

With gratitude for all they give back

Volunteers are all heart! As we navigate back to in-person opportunities, we’d like to thank the many individuals who have continued to give of their time and talents through COVID-19. There are so many ways to make a difference at MedStar St. Mary’s Hospital—and so many individuals and committees supporting our patients, staff, and community hospital. Here, we’re proud to spotlight some of the many and their recent accomplishments.

Philanthropy Committee
The Philanthropy Committee of the Board of Directors helps raise funds for important hospital initiatives, particularly through the hospital’s annual Gala. Recent projects include scholarships for healthcare students and equipment for robotic-assisted surgeries. The 2022 event raised more than $364,000 toward the Scholarship Endowment of MedStar St. Mary’s Hospital.

Hospital Auxiliary
For 107 years, members of the Hospital Auxiliary have volunteered to assist patients and raised funds in support of our nonprofit hospital. More than $5 million has been given to fund everything from linens and paint in the 20th century to state-of-the-art medical equipment and hospital renovations in present day. Most recently, the Auxiliary generously donated $455,000 to our Scholarship Endowment for healthcare students, with some of the proceeds earned from volunteer hours manning the hospital’s Gift Shop.

Board of Directors
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The Patient and Family Advisory Council for Quality and Safety (PFACQS), established at every MedStar Health entity, holds regular meetings to enlist the guidance of our own patients and families on strategic practices related to the delivery of care. PFACQS members share their own experiences and provide important insights on opportunities for improvement and what we’re doing well.

With gratitude for all they give back

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The Philanthropy Committee of the Board of Directors helps raise funds for important hospital initiatives, particularly through the hospital’s annual Gala. Recent projects include scholarships for healthcare students and equipment for robotic-assisted surgeries. The 2022 event raised more than $364,000 toward the Scholarship Endowment of MedStar St. Mary’s Hospital.

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News briefs

Telemetry nursing team earns Trailblazer honors
The Telemetry team at MedStar St. Mary’s Hospital was recently honored with the NICHE-ABIM Foundation Choosing Wisely Trailblazer Award, recognizing innovation in the service of acutely-ill elderly patients. Telemetry nurses Erin Balderson, RN, and Rudi Adriani, RN, led a study of the initiation of a nurse-driven sleep protocol to prevent hospital delirium—a potentially dangerous condition that primarily affects seniors. The Trailblazer Award is presented by Nurses Improving Care for Healthsystem Elders (NICHE) and the American Board of Internal Medicine (ABIM).

Visitor badge system has been upgraded
New digital check-in technology is now in place to aid in our commitment to providing a safe environment for our patients, visitors, and team members. In the main lobby, all visitors are asked to present identification to generate a temporary sticker badge.

County launches new health data dashboard
The St. Mary’s County Health Department (SMCHD) has launched a new health data dashboard to provide information on local health indicators as compared to state averages and target goals. Health indicators can be tracked over time to show trends in community health. Visit SMCHD.org/DataDashboard to access the new tool.

Eighth “A” for hospital safety
MedStar St. Mary’s Hospital earned its eighth “A” Hospital Safety Grade—the highest available—from The Leapfrog Group for Fall 2022. This national distinction celebrates our team’s achievements in protecting hospital patients from preventable harm and errors. Visit HospitalSafetyGrade.org to learn more and compare hospitals across the region.

Run for Hospice: April 15
The 26th Run & Fun Walk for Hospice of St. Mary’s will be held Saturday, April 15, in Leonardtown. Choose a 5K run, 10K run, or walk—a fun challenge for a great cause! Visit RunForHospice.org for sign-up details and more.

Past president honored for rural health work
Christine Wray, FACHE, past president of MedStar St. Mary’s Hospital and MedStar Southern Maryland Hospital Center, was recognized with the 2022 Outstanding Rural Health Achievement Award at the Maryland Rural Health Conference. The honor recognizes Wray’s commitment to outstanding program development and health efforts for our community. Wray retired in January 2022 after 30 years of service.

Eighth “A” for hospital safety
You opened your prescription bottle and realized it is about time for a refill. Checking the label, you notice you have no refills left. There will not be enough time to schedule a visit with your provider before the prescription runs out. You already know you will be extra busy at work the next day and won’t be able to play phone tag with the provider’s office to get the prescription renewed.

You need a convenient, easy way to communicate with your provider to get that prescription updated. Enter the myMedStar patient portal. With myMedStar, MedStar Health patients can easily manage their appointments; receive lab, radiology, and pathology reports automatically; send requests and communicate securely with their doctor’s office; and much more, all from their computer, tablet, or cell phone at their convenience, 24/7. The portal is free and information shared is secure.

Through the myMedStar patient portal, patients can:
- View the results of the tests ordered by your provider
- Request prescription renewals
- Send a message to the office and to your provider
- View and print copies of the visit summary
- View health records including immunization summary
- Request referrals

Instructions to sign up for the portal are provided with an office visit summary, or you can call your provider’s office for assistance. Visit MedStarHealth.org/myMedStar to self enroll.

Your health online, anytime.
Manage your entire family’s health records
Proxy access to myMedStar grants a personal representative including parents, sons/daughters, husbands/wives, and legal guardians access to all myMedStar functionality on behalf of another patient. All proxy access requires completion of a proxy access authorization form.

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Healthy Living

support the startup beyond the generous “We are looking at grant funding that would services through local food pantries,” said Brenda. supplying recipes and preparation suggestions. to also offer information on how to best use the such as diabetes. Ultimately, the department hopes during a hospital stay or through outpatient services be given to patients with health issues that may be community food banks. Patients could be identified be connected to community resources may reach out to the

Population & Community Health (PCH) Department. “This could result in adverse effects just by meeting

Lending a healthy helping hand
Hospital department supporting patients with food insecurity and chronic health conditions

Food insecurity may be an unfamiliar phrase to some, but for many people it is a daily struggle, especially if they are suffering from chronic health conditions. Community food banks are an important resource for those facing food insecurities, but they are often stocked with less nutritious items, including canned or packaged food products that have a longer shelf life and are easy to store and distribute.

“We found that many of our patients who are food insecure and dependent on pantries for basic needs were not receiving items that would help them appropriately manage their medical conditions such as cardiac issues or diabetes,” said Brenda Wolcott, MPH, director of MedStar St. Mary’s Hospital’s Population & Community Health (PCH) Department. “This could result in adverse effects just by meeting a basic need of nourishment.”

This past fall, the Population & Community Health Department enlisted the help of the hospital’s Equity, Inclusion & Diversity Committee to collect donations from hospital staff for a healthy food pantry. The pantry is stocked with items that could be given to patients with health issues that may be complicated by the types of food offered through community food banks. Patients could be identified during a hospital stay or through outpatient services such as nutrition counseling for conditions such as diabetes. Ultimately, the department hopes to also offer information on how to best use the items offered through their healthy food pantry by supplying recipes and preparation suggestions.

“Our hope is that this will be ongoing and become a model in the community for future services through local food pantries,” said Brenda. “We are looking at grant funding that would support the startup beyond the generous donations of our staff!”

What’s in a healthy food pantry?
If you would like to donate healthy food items to a local food pantry, consider the following:

Whole grain items
Brown rice, quinoa, pastas, oatmeal (low/no sugar), crackers, and couscous

Proteins
Canned tuna or chicken in water, nuts, seeds, dried beans, canned beans (no/low sodium) natural peanut butter, or other nut butters

Fruits and vegetables
Fruits canned in 100% juice, no sugar added applesauce, 100% juice, canned vegetables (low sodium), dried fruit (no added sugars), natural jams/jellies, low sodium tomato sauce

Dairy
Shelf-stable low-fat milk (evaporated, powdered, soy)

For more information about nutritious food choices
Patients with chronic conditions such as diabetes, high blood pressure, or cardiac issues, can receive nutrition counseling through Population & Community Health. A doctor’s order is required. Patients facing food insecurity issues who would like to be connected to community resources may reach out to the department at 301-475-6019 for additional information.

Class availability is subject to change. After enrolling, you will be notified should a session need to be rescheduled. Because no registration is required for most support groups, please reach out using the phone numbers below to verify if meetings are scheduled as planned.

Support groups
Health Connections at MedStar St. Mary’s Hospital hosts support groups including:

• Bariatrics (virtual, second Saturday of each month, 10 a.m. initial registration required)
• Lactation (every Wednesday, 10 a.m. and 11:15 a.m.; registration required)
• Parkinson’s (second Tuesday of each month, 4:30 p.m.)
• Stroke Survivors (second Tuesday of each month, 1 p.m.)

Call 301-475-6019 to learn more or to register.

Cancer care
Cancer support group
Meetings held the first and third Wednesday of each month. Call 240-434-7241 to register, or search and join “MedStar St. Mary’s Hospital Cancer Support Group” on Facebook.

Breast cancer support group
Held virtually through Microsoft Teams. Upcoming dates include March 6, March 21, April 17, May 1, and May 17, all at 6 p.m. To receive an email invite or learn more, please call 240-695-6904. Visit Facebook.com/groups/ MedStarBreastHealthProgram for support.

Diabetes education
Diabetes Self-Management Begins April 17, 5:30 p.m. In this four-week diabetes self-management program, participants can engage in conversations about their experience with diabetes, blood sugar monitoring, healthy eating and activity, and long-term disease management. Call 301-475-6019 to register or learn more.

Take Control of Diabetes Appointments are offered to meet one-on-one with a registered dietitian: A provider’s order for diabetes education is required. Services may be covered by Medicare, Medicaid, and most private insurance plans. Call 301-475-6019 for more information.

Simple Changes (Pre-diabetes) Begins March 15, 5:30 p.m. Participate in our free, year-long class designed to eliminate possible diabetes risk factors by making simple, healthier changes in your life. Program includes free body composition screenings, handouts, giveaways, and support between sessions. This one-year program is a combination of weekly and monthly sessions. Call 301-475-6019 to register.

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Parents-to-Be Workshop Offered monthly. March 4, April 1, May 4, 8 a.m. to 4 p.m., Health Connections, $100/couple

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Combine classes into a one-day overview. Topics include childhood, breastfeeding, infant CPR, and practical baby care skills. In-person sessions and online options available. Call 301-475-6019 to sign up.

Please note: some classes require a minimum number of participants to hold the course. If the need arises to cancel a class, we will make every effort to accommodate you on an alternate date.

Safe Sitter
March 25, 2025, 8-4:30 a.m. to 4 p.m., Health Connections, Outpatient Pavilion, $65.

Adolescents 12-14 learn babysitting tips, basic first aid, and CPR. In-person session. Call 301-475-6019 to sign up.

Pulmonary
Tobacco Cessation Program Virtual program to help participants quit using tobacco products through behavioral modifications, stress management, and other techniques. Visit SMCHD.org/Tobacco to learn more.

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1. **Hospice means I’m giving up hope.**
   Hospice changes the focus to quality of life, not quantity of life. You are choosing to spend your time how you would like—and choosing your goals of care.

2. **Hospice is only for patients with little time to live.**
   The hospice benefit was designed to care for patients in their last six months of life. For some people, that timeframe is extended. On average, patients on hospice actually live one month longer than patients who did not receive hospice care. In fact, some patients receive such great care that they “graduate” from the program.

3. **Hospice is only for cancer patients.**
   Hospice cares for anyone with a life-limiting illness, including chronic obstructive pulmonary disease (COPD), heart failure, Parkinson’s, dementia, kidney disease, and many other conditions. If someone has been hospitalized or visited the Emergency Department multiple times for their symptoms, consider calling hospice for support.

4. **I can’t afford hospice services.**
   Hospice services are an insurance benefit. Medicare covers the cost 100%. Most commercial insurance plans have a benefit as well, and some allow for patients to receive treatment and hospice care at the same time. Fundraising dollars go to help those who can’t afford it.

5. **A doctor must give me an order for hospice, and then I’ll be losing my own physician.**
   Patients may contact Hospice of St. Mary’s directly—a physician’s referral is not needed. Hospice encourages providers to remain involved in their patients’ care as valued members of the collaborative team.

6. **Hospice provides 24/7 care.**
   Hospice provides supportive care and helps families to care for their loved ones wherever they call home. While we provide a nurse on call 24/7 for any needs, visits from nursing staff will be scheduled and intermittent.

Whatever your stage of illness, you have choices. We’re here for you! Contact us so we can help -- call 301-448-3863.