

Healthy Living



Robotic hernia repair

Surgery gets patients
back to active living.

Rare autoimmune neurological condition diagnosed
Second recognition of excellence for bariatrics | IR procedure saves lives

Winter 2024



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Letter from the president

Dear friends,

As we approach the end of another year, it is a natural time to reflect on the goals we set for ourselves in January and to assess the progress we've achieved. This year, MedStar St. Mary's has made significant strides in establishing a leading minimally invasive surgical program, setting the benchmark in our region for both the volume of procedures and the delivery of safe, quality care. Our commitment to advancing healthcare is exemplified through our robotic surgical procedures, such as hernia repair, as well as our cutting-edge interventional radiology program. These advancements allow us to provide you with less invasive options, leading to faster recovery times so you can return to your daily life sooner and healthier. We are dedicated to further expanding these services to meet your evolving healthcare needs with innovative solutions.

Another noteworthy achievement this year was attaining Magnet recognition, which underscores our commitment to nursing excellence. In October, a group of our devoted team members represented MedStar St. Mary's at the Magnet conference in New Orleans, where they connected with leaders in the field and returned with valuable insights to enhance our nursing care.

As we close out the year, I want to express my deep gratitude for our community's unwavering support. Our annual Gala was a resounding success, raising essential funds for a refresh of our Emergency Department. I am also excited about the upcoming Festival of Trees, an event that will support the Hospice of St. Mary's and bring us together in celebration.

I hope this holiday season brings you peace, wellness, and the joy of family and community. Thank you for being an integral part of our journey. Together, we are making a remarkable difference in the lives of our patients and neighbors.

Mimi Novello, MD, MBA, FACEP



As a board member of the St. Mary's County Chamber of Commerce, I was thrilled to visit St. Clement's Island Museum during the Chamber's September Business After Hours event. It was fascinating to chat with Jimmy Hayden, chairman of the Chamber, about our community and its rich, unique history. We have such a diverse community, and I genuinely enjoy learning more about the county and its residents.

ON THE COVER

Marvin Berkowitz is back to exercising frequently and regularly—the way he always did before a hernia stopped him in his tracks.

General surgery

Robotic hernia repair

Surgery gets patients back to active living.

At 72, Marvin Berkowitz of Leonardtown, works out daily and competes as an indoor virtual rower with people all over the world. The former physical education teacher, wrestling coach, and competitive weightlifter has been an athlete his entire life. When he discovered an unusual lump in his groin after his workouts, he knew it had to be checked out.

"The lump didn't cause any pain. I would push on it and it would disappear until the next workout, but I knew it was time to see a physician," Marvin explained. His primary care doctor diagnosed him with an inguinal hernia and referred him to general surgeon **Gustavo Franco Vasquez, MD**, at MedStar St. Mary's Hospital.

Similar to Marvin, Martin Siebert first suspected he had a hernia when he noticed a small bulge and numbness in his groin. He spent less time on his feet, hiking, hunting, or working on his cars because of the hernia.

"I put all activities and hobbies on hold, including working on my 1965 Shelby AC Cobra and Mustang GT 500,

because if I stood upright on my feet for more than 20 minutes my groin area would go numb," said Martin. "I was unable to do much with my cars because any work under the hood required standing. Even washing and waxing, which can be a big part of owning collector-type cars, was out of the question."

What is a hernia?

Dr. Franco explained that the abdominal wall is composed of different layers: the skin, a fatty layer, and a muscular layer wrapped with a strong sheet of collagen called fascia. An opening in the fascia can cause abdominal tissue—a portion of fatty tissue or intestine—to protrude or herniate through this opening.

"The most common types of hernia we treat are umbilical (belly button), inguinal (groin), femoral (low groin), and incisional or a hernia related to a previous abdominal surgery," he said.



Martin Siebert can once again work on his 1965 Shelby AC Cobra after a hernia surgery at MedStar St. Mary's Hospital brought relief.

Common hernia symptoms

Most hernias are not painful, but they can be exacerbated by coughing, straining, twisting, and heavy lifting and should be addressed by a physician. Common symptoms of a hernia include:

- A lump or bulge around the belly button or groin
- A feeling of pressure or discomfort around the hernia site especially with activity such as lifting, bending, or twisting



Marvin Berkowitz of Leonardtown is now back to exercising again with his three-wheel push scooter, among other types of exercise, after hernia surgery.

- Discomfort or burning at the hernia site
- In rare cases, hernias can lead to complications such as incarceration and strangulation of the protruding tissue, which becomes trapped in the abdominal wall, cutting off the blood flow to the tissue.

“A hernia does not simply go away with time and cannot be fixed with supportive devices such as abdominal belts or trusses,” general surgeon **Sameer Alrefai, MD**, explained. “The treatment for a hernia is surgery. The earlier we diagnose a hernia and surgically repair the opening, the sooner the patient will recover and return to daily activities.”

Hernia repair

Marvin and Martin both had robotic surgical hernia repair. “The robotic approach offers the benefits of being a minimally invasive procedure, allowing most patients to be discharged home the same day, requiring less pain medication, with a decreased risk of complications thanks to the superb performance during the repair of tissues,” Dr. Franco stated. “In general, patients return to their usual level of physical activity in about two weeks.”

Surgeon **Veronica Marshall, DO**, added that the type of surgical technique used is tailored to each patient.

“Generally, groin and incisional hernias require placement of mesh as part of the repair using the laparoscopic/robotic platform or, less often, via an open approach,” said Dr. Marshall who added that umbilical hernia may or may not require mesh placement depending upon its size. The placement of synthetic mesh provides added support to the weakened abdominal tissue.

Remarkable recovery

“Because I am very active, not being able to work out is the worst form of punishment for me,” exclaimed Marvin who was happy with the robotic hernia repair because it was less trauma for his body and a quicker recovery and return to physical activity.

Martin experienced similar results and relief. “The robotic procedure was simple, and Dr. Alrefai had me back home watching TV by 10 a.m. The whole experience was fantastic. I had no post-operative pain and only had three small holes in my stomach where the robotic surgery was performed. These healed up fast with little scarring. Everyone at MedStar St. Mary’s Hospital was fantastic to work with,” he said.

For both men, recovery took several weeks of no heavy lifting and being careful not to twist, bend, or turn too much while everything healed.

“I eased back into my workouts and I’m back to my former competitive self,” added Marvin who is again rowing and weightlifting after his inguinal hernia repair on the right side, and a year later, on the left. “I’m almost back to 100% and the experience and recovery were excellent.”

Martin had a similar positive recuperation, adding, “Before my surgery, I was pretty much shut down from most day-to-day activities, but afterward, with the short recovery time, I am better than new.”

What our patients say.

Veronica Marshall, DO

“Dr. Veronica Marshall treated my diagnosis and pain with particular emphasis on my personal needs. This surgeon truly listens and provides individualized treatment. My recovery was exceptional and I would highly recommend her skills to others.” –Patient

Sameer Alrefai, MD

“Dr. Alrefai fixed me up. The result could not have been more perfect. I know I went to the right doctor.” –Martin Siebert, patient

Gustavo Vasquez Franco, MD

“I would highly recommend Dr. Franco. He is very thorough and conscientious. He answered all of my questions and is an excellent physician.” –Marvin Berkowitz, patient

Drs. Alrefai, Franco, and Marshall see patients at:

MedStar St. Mary’s Outpatient Pavilion
25500 Point Lookout Rd., Suite P200
Leonardtown, MD 20650

Call **240-434-4088** for an appointment.



From left: Dr. Marshall, Dr. Alrefai, and Dr. Franco with the minimally invasive da Vinci surgical robotic system.

Do women develop hernias?



Different types of hernias can present in unique ways in men and women.

“Women are more likely to experience hiatal hernias, which occur when part of the stomach pushes through the diaphragm. This is often linked to factors such as pregnancy, obesity, and aging,” said **Sameer Alrefai, MD**, who noted that women often experience different or more subtle symptoms of the condition compared to men.

“In women, inguinal hernias, for example, may present as groin pain or discomfort, which might be mistaken for other issues such as pelvic pain or gynecological problems,” Dr. Alrefai explained. “Hiatal hernia symptoms can include heartburn, regurgitation, or difficulty swallowing, which may be confused with gastrointestinal issues rather than recognized as a hernia.”

As with any new symptom, when in doubt, get it checked out.

Going the extra mile

Diagnosing a young man's rare neurological condition.

It was Jan. 6, George Joslyn's 40th birthday, when he had his first stroke.

"I had a headache for a week that wouldn't respond to the usual over-the-counter pain relievers, so I finally made an appointment to see my primary care doctor," explained George of Lusby, MD. "Two days before that appointment, I experienced my first stroke."

Soon after, George experienced a second stroke-like episode and was transported to MedStar St. Mary's Hospital's Emergency Room where he received treatment and an MRI to help diagnose the cause of his strokes.

At a follow-up appointment after discharge from the hospital, George was seen by **Toluwalase Tofade, MD**, director of autoimmune neurology and multiple sclerosis at MedStar St. Mary's. She believed that George's symptoms were concerning—an altered mental state, and lingering effects from his first stroke. Her keen eye for subtle neurological signs and strokes that appeared atypical on his MRI led her to suspect George had primary central nervous system (CNS) vasculitis, a rare and serious autoimmune condition where blood vessels in the brain become inflamed.

Dr. Tofade ruled out other potential causes of George's neurological symptoms before recommending treatment. George was transferred for additional testing, to confirm Dr. Tofade's diagnosis of primary CNS vasculitis. Dr. Tofade's training during her fellowship in neurology meant she had access to a network of experts who could perform a neurological biopsy and assist with the pathological diagnosis in this complex case.

"My extensive training in autoimmune neurology has enabled me to diagnose and treat rare and complex autoimmune neurological disorders," said Dr. Tofade. "I do not hesitate to go the extra mile in search of a diagnosis, and I am constantly



George Joslyn is happy to have returned to full time duty as a firefighter thanks to the expert care of neurologist Toluwalase Tofade, MD.

collaborating with various autoimmune neurology experts across the country to help my patients."

The road back to recovery

George started a six-month regimen of chemotherapy and steroids to reduce the inflammation in his brain and control his neurological symptoms. His primary CNS vasculitis is now managed with an immunosuppressant to control the inflammation, regular MRIs, and follow-ups with Dr. Tofade to ensure his condition remains in remission.

George returned to full duty as a firefighter for the Montgomery County Fire and Rescue Service thanks to Dr. Tofade's care.

"Dr. Tofade saw things that other doctors didn't and took charge of my diagnosis and treatment plan from start to finish," he said. "I was lucky to find her and to be cared for at MedStar St. Mary's Hospital."



Dr. Tofade sees patients at:
 Outpatient Pavilion
 25500 Point Lookout Road, 2nd floor
 Leonardtown, MD, 20650
 Call **240-434-7929** to schedule an appointment.

News briefs

MedStar St. Mary's honored for commitment to wellness



MedStar St. Mary's Hospital received a **2023 Wellness at Work award** from the Maryland Department of Health's Healthiest Maryland Businesses program and has regularly been recognized since 2017. Wellness at Work acknowledges Maryland businesses that demonstrate a commitment to workplace wellness. MedStar St. Mary's earned Exemplar status, the highest



recognition available through the program. Visit **MedStarHealth.org/Newsroom** to learn more about MedStar Health's commitment to employee wellness.



Hospice Festival of Trees returns Dec. 7

The 17th annual Hospice Festival of Trees will be held Saturday, Dec. 7, from 10 a.m. to 3 p.m. at **University System of Maryland at Southern Maryland**, 44219 Airport Road, California, Maryland. The festival showcases holiday trees and wreaths decorated by generous individuals and businesses. The proceeds raised from the auction of the trees supports Hospice of St. Mary's which cares for those with life-threatening illness at the Hospice House and in patients' homes. Visit **HOSPICEFOT2024.givesmart.com** to learn more.

MHA President visits

President and Chief Executive Officer of the Maryland Hospital Association (MHA), Melony Griffith, visited MedStar St. Mary's Hospital in early September. Having accepted the role only a year ago, her trip was part of a tour to learn more about every Maryland hospital. President Griffith had the opportunity to engage in inspiring discussions with MedStar St. Mary's leaders and staff about what makes the hospital unique. The visit highlighted the hospital's dedication to delivering a wide range of high-quality services and reinforced its role as a vital healthcare provider in the community.



Pictured are Dawn Yeitakis, MS, BSN, RN, NEA-BC, vice president and chief nursing officer; Griffith; Mimi Novello, MD, MBA, FACEP, president and chief medical officer of MedStar St. Mary's; and Nate Evans, vice president of operations.

Life-threatening pulmonary embolism.

No match for MedStar St. Mary's Hospital Interventional Radiology team.

After weeks of battling a stubborn sinus infection, Andrew Hawkins of Charlotte Hall, 62, began experiencing shortness of breath. When his breathing worsened significantly, he and his wife rushed to the Emergency Room (ER) at MedStar St. Mary's Hospital. By this point, he couldn't walk from the car to the ER entrance without stopping to catch his breath.

Due to the severity of his symptoms, he was immediately assessed with blood work, a chest X-ray, and a CT scan. The results revealed a life-threatening saddle pulmonary embolism (PE), a massive blood clot that blocked 90% of his right pulmonary artery and 65% of his left, obstructing blood flow to his lungs and placing immense stress on his heart, causing it to enlarge dangerously.

Patients with pulmonary embolism benefit from the highly specialized Interventional Radiology (IR) program at MedStar St. Mary's which offers access to one of the region's most robust PE services. Interventional

radiologist **Moutasem Aljundi, MD**, designed a PE process to ensure patients in crisis are identified quickly, relevant tests and imaging are expedited, and the treatment is delivered seamlessly.

"The success of the hospital's PE program is attributed to the combined effort of a multidisciplinary team that includes the Emergency Department, the intensive care unit, and the Interventional Radiology nurses and technologists," added Dr. Aljundi.

Andrew experienced this rapid response firsthand. Recognizing that his heart was in distress, ER physician Maria Lawrynovicz, MD, admitted Andrew to the hospital and he was soon prepped for a pulmonary artery thrombectomy to remove the dangerous clot.

What is a pulmonary artery thrombectomy?

A pulmonary artery thrombectomy is a delicate, minimally invasive procedure performed by the skilled IR team in the hospital's interventional radiology suite.

"With a pulmonary embolism, time is of the essence and a thrombectomy saves lives," said Dr. Aljundi.

The procedure begins with a half-inch incision in the groin or neck area to access a blood vessel in which a thin catheter (a hollow tube) and guide wire are inserted and carefully led up through the heart and into the arteries of the lung to access the blood clot. Using specialized imaging technology, Dr. Aljundi and the IR team monitor the catheter's progress to ensure it safely reaches the clot.

Once in place, a special suction syringe was employed to extract Andrew's PE from both lungs. A specialized filter separates the clot from the aspirated blood and returns it to the patient to ensure minimal blood loss. This technique effectively removed the massive embolism and restored blood flow to his lungs.

"Patients are carefully assessed prior to the procedure to determine their appropriateness for sedation. In many instances, a PE thrombectomy can be done with minimal or no sedation to minimize additional stress to the heart," explained **Amy Magyar, MSN, AGNP-C**, IR nurse practitioner. "We take the time to explain the procedure which helps patients feel more comfortable. The pulmonary artery thrombectomy is not painful and patients tolerate it quite well."

"After Amy explained everything to me, I felt ready," said Andrew, who shared a prayer with the team before the procedure began. "Katy Goss, the IR nurse, stayed by my side and kept me calm. I'll never forget the moment Dr. Aljundi removed the clot from my right lung—I felt immediate relief."

After the procedure, most patients spend one to two nights in the hospital, see a hematologist to begin a regimen of blood thinners, and continue follow-up care after being discharged to help prevent future blood clots.

Today, Andrew is breathing easier and is grateful for the expert care he received every step of the way. "I owe the team at MedStar St. Mary's my life," he said. "From start to finish, the care was incredible."

Interventional Radiology offers minimally invasive treatments for wide range of conditions.

Interventional Radiology (IR) is a medical specialty that uses tiny incisions and imaging tools (like X-ray, ultrasound, CT, and MRI) to perform treatments that often replace open surgery. These procedures lead to fewer complications and faster recovery.

MedStar St. Mary's Hospital's IR Services include:

- **Liver disease:** MedStar St. Mary's IR team recently performed its first TIPS (Transjugular Intrahepatic Portosystemic Shunt) procedure. In TIPS, a small tube (shunt) is placed in the liver to reduce pressure in the portal veins.
- **Liver cancer:**
 - **Microwave ablation:** Uses heat to destroy cancer cells.
 - **Intraarterial chemotherapy:** Delivers high-dose chemotherapy directly to the tumor.
- **Kidney cancer:**
 - **Cryoablation:** Freezes and destroys kidney cancer cells.
- **Men's health:**
 - **Prostatic artery embolization (PAE):** Treats enlarged prostate by blocking blood supply, causing it to shrink.
 - **Spermatic vein embolization:** Redirects blood flow from varicoceles (enlarged veins in the scrotum) to reduce pain and swelling.
- **Women's health:**
 - **Uterine artery embolization:** Reduces blood flow to uterine fibroids, shrinking them.
 - **Endovascular treatment:** Treats adenomyosis and pelvic congestion syndrome, which impact blood flow in the pelvic area.
- **Venous diseases:** Treats deep vein thrombosis (DVT), pulmonary embolism, and May-Thurner syndrome.
- **Pain management:**
 - **Basivertebral nerve ablation:** Treats chronic lower back pain.
 - **Neurostimulator implantation:** Helps manage chronic pain.
 - **Cooled radiofrequency ablations:** Treats joint pain in the knee, hip, shoulder, and sacroiliac joints.
 - **Vertebral fracture treatments:** Minimally invasive repair options like kyphoplasty.
- **Additional procedures**
 - **Vascular access:** Inserts a catheter into a vein for blood draws, medications, or fluids.
 - **Chemotherapy ports:** Small devices under the skin that allow medication to be delivered directly into a vein.
 - **Hemodialysis catheters:** Used in dialysis to remove, clean, and return blood.
 - **Gastrostomy tubes:** Long-term feeding tubes inserted into the stomach.
 - **Tumor biopsies:** A needle is used to collect a tissue sample from a tumor for analysis.

Visit [MedStarHealth.org/InterventionalRadiology](https://www.MedStarHealth.org/InterventionalRadiology) to learn more about the procedures and to make an appointment with an IR specialist.



Center, from left: Amy Magyar, MSN, AGNP-C, IR Nurse Practitioner; patient Andrew Hawkins; and Moutasem Aljundi, MD, interventional radiologist, surrounded by team members who support the amazing care in this specialized area of MedStar St. Mary's Hospital.

Emily Stagner named assistant vice president of Philanthropy



Emily Stagner was recently named assistant vice president of Philanthropy at MedStar St. Mary's Hospital, bringing a wealth of experience in fundraising, economic development, community connection, and strategic planning. Combining her passion for building connections with

her background in non-profit and government roles, Emily oversees fundraising for major capital projects at the hospital and Hospice House, while

also strengthening community engagement and awareness of MedStar Health's resources throughout Southern Maryland.

Emily previously served as Main Street Manager for the Town of Leonardtown, focusing on economic revitalization and historic preservation. She formerly served as the volunteer and development coordinator at Hospice of St. Mary's and is excited to be back with the MedStar Health family in her new role.

Following the recent success of the 2024 Gala—one of the hospital's largest fundraising events supporting capital improvements—Emily extended her gratitude to sponsors and attendees. "We're immensely grateful for the community's generous support. Thanks to this year's Gala, we're excited to invest in refreshing our Emergency Department, including upgraded nursing workstations and enhanced aesthetics that will benefit our clinical teams and the patients we serve," she said.

A gift that has been changing lives for 15 years



January 2025 marks 15 years since **The Grace Anne Dorney Pulmonary & Cardiac Rehabilitation Center** opened at MedStar St. Mary's Hospital. The center was started as a gift to MedStar St. Mary's by broadcast journalist Ted Koppel in honor of his wife, Grace Anne, a Maryland attorney and business manager who suffered from Chronic Obstructive Pulmonary Disease (COPD).

"We are excited to be celebrating this milestone," said **Mimi Novello, MD, MBA, FACEP**, president and chief medical officer of MedStar St. Mary's Hospital. "The incredible work of the Grace Anne Dorney Center has truly been a gift to this community that has had a profound impact on so many."

The Grace Anne Dorney Pulmonary & Cardiac Rehabilitation Center offers expert cardiac and pulmonary rehabilitation programs monitored by a team of specialists. Visit [MedStarHealth.org/GADC](https://www.MedStarHealth.org/GADC) or call **240-434-7143** for more information. A physician signed referral is required.

Winter 2024 calendar

To register for support groups or classes, call **301-475-6019** or email msmh-populationhealth@medstar.net.

Support groups

Health Connections at MedStar St. Mary's Hospital hosts support groups. Because no registration is required for these, please reach out using the contacts below to verify if meetings are scheduled as planned.

- **Lactation** (every Wednesday, 10 a.m. to noon)
- **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 register.



Blood drives

Dec. 13 and 20, 10 a.m. to 3:30 p.m., Health Connections. Registration is required through the Red Cross. Register at [RedCrossBlood.org](https://www.RedCrossBlood.org).

Bariatrics

Virtual **Bariatric Support Group** meetings at 10 a.m., second Saturday of each month. Initial registration required. Call 240-434-4088.

Cancer care

Cancer care support group

Meetings held virtually the first and third Wednesday of each month. Call 240-434-7247 to register, or join "MedStar St. Mary's Hospital Cancer Support Group" on Facebook.

Breast cancer support group

Monthly, virtual. To receive an invite or learn more, please call 301-877-4673. Visit [Facebook.com/groups/MedStarBreastHealthProgram](https://www.Facebook.com/groups/MedStarBreastHealthProgram) for support.

Ask the Experts: Quarterly Lunch and Learn



Thursday, Feb. 13, 2025, from 11:30 a.m. to 2 p.m., Health Connections classrooms Outpatient Pavilion MedStar St. Mary's Hospital
No cost. Call 301-475-6019 to register.

Community education

Take Control of Diabetes

Appointments available 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 301-475-6185

Childbirth & family education

Parents-to-Be Workshop

In-person classes are held from 8 a.m. to 4 p.m., Health Connections, \$100/couple. Call for upcoming dates. Combines four traditional parenting classes into a one-day overview. Topics include childbirth, breastfeeding, infant CPR, and practical baby care skills. Virtual options also available. Call 301-475-6019 to register.

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.



Pulmonary

Quit Tobacco Program

Virtual program to help participants stop using tobacco products. Visit [SMCHD.org/Tobacco](https://www.SMCHD.org/Tobacco) for dates and details.

25500 Point Lookout Rd.
Leonardtown, MD 20650

MedStar St. Mary's Hospital



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Another reason to make us part of your team.

Sameer Alrefai, MD, and Nurse Practitioner Katelyn Edinger stand near the da Vinci robot used to perform most bariatric surgeries at MedStar St. Mary's Hospital.



Bariatric Surgery Program earns Center of Excellence status.

Accredited by the Metabolic and Bariatric Surgery Accreditation and Quality Improvement Program® in 2022, the **MedStar Health Bariatric Surgery Program at MedStar St. Mary's Hospital** has also recently been named a Center of Excellence by Optum's Clinical Sciences Institute (CSI).

Programs that belong to the Optum Center of Excellence program have fewer complications and readmissions as well as lower reoperation rates and lower average cost per surgery. COE programs are reviewed annually to ensure they continue to meet Optum's professional standards.



"Being part of quality programs such as Optum's Center of Excellence gives our patients the assurance that we have met strict standards regarding quality and safety," said **Sameer Alrefai, MD**, general and bariatric surgeon at MedStar St. Mary's. "Obesity is a serious health problem in the United States, and we are thrilled that being a member of the Optum Center for Excellence will open up the option of bariatric surgery to additional members of our community."

All bariatric surgery Optum COEs meet rigorous criteria for:

- Annual volume of surgeries
- Certifications
- Multidisciplinary team
- Complications and mortality rate
- Length of program existence
- Number and experience of surgeons