Do you struggle with sinusitis? | Great orthopaedic care in a new location
Partnering for pelvic health | COVID-19 patient returns to thank staff

Summer 2021
Dear friends,

Are you feeling as excited as we are? The warmer months and incredible vaccination efforts that have been made during the first half of 2021 have bolstered the spirits of so many of us at MedStar St. Mary’s Hospital. During the past couple of months, the bright sun feels like a beckoning light at the end of a long tunnel.

Even though we are still battling the COVID-19 pandemic, we have not lost sight of the future and we continue our efforts to build a robust collection of medical services in our community. The cover story of this edition highlights our cancer department’s recent admission to the MedStar Georgetown Cancer Institute. Our cancer care team has always done an amazing job caring for our community and now it will have even greater resources available to our patients. I invite you to read the journeys of two local patients who have benefitted from the incredible care provided by this team. Their stories are featured and begin on page 3.

In this edition, you will also get to meet one of our newest specialty providers, Frank Chen, MD, ear, nose, and throat specialist. Dr. Chen answers questions about one of the most frequent conditions he treats—sinusitis—on page 9.

On page 14, you will meet COVID-19 survivor, Rick Dressler. Rick was one of MedStar St. Mary’s Hospital’s first COVID-19 patients. After being placed on a ventilator twice, Rick was able to beat the odds and return home to his family where he continues to focus on his recovery. He made a special trip back to our hospital a year after his discharge to thank the providers who helped him survive.

As we move through 2021, we are eternally grateful for the continued support of our community. Every donation of food, supplies, notes, or social media praise has meant a great deal to everyone at our hospital. We may have cared for you during the past year, but your kindness was what carried us through it all. Thank you and enjoy your summer!

Kindest regards,

Christine R. Wray

Letter from the president

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Healthy Living is published by MedStar St. Mary’s Hospital. The information is intended to inform and educate about health, not as a substitute for consultation with a physician.
Conquering cancer close to home.

A young dad faces down a cancer diagnosis, while a nurse becomes the patient.

Daniel “Danny” Holdsworth was a healthy husband, father, and local deputy sheriff when he began experiencing testicular pain in 2018. After visiting his primary care team at MedStar Medical Group at Charlotte Hall, the 35-year-old went for ultrasound testing—which uncovered a lump.

With youth on his side, cancer wasn’t the first thing on his mind. Still, Danny was referred to Ryan Hankins, MD, a board-certified urologist at MedStar Georgetown University Hospital, part of the MedStar Georgetown Cancer Institute, which combines medical expertise and the latest therapies at MedStar Health with access to cancer research expertise through Georgetown Lombardi.
Comprehensive Cancer Center. Joined by his wife, Joni, the couple met with Dr. Hankins—a urologic oncology specialist—to discuss Danny's results. Dr. Hankins confirmed it was a tumor.

Testicular cancer is a less common type of cancer—representing just 0.5% of new cancer cases in 2020, according to the National Cancer Institute. It is, however, the most common cancer found in American men ages 15 to 35. Though the exact cause of testicular cancer is unknown, the disease is considered highly treatable, especially if found early.

Formed in the tissues of one or both testicles, its first symptom is most often a lump or swelling and enlargement of the testicle. Other signs may include testicle or scrotum pain or discomfort; a feeling of heaviness in the scrotum; back pain; and a dull ache in the abdomen or groin, among other symptoms. It’s also possible that an individual will have no symptoms at all.

While still processing the diagnosis, the Holdsworths noted that Dr. Hankins had already started looking to move around his schedule. Danny was headed for surgery.

“Whoa, whoa—is this really happening?” Danny recalled thinking, noting the team was springing into action immediately. With two young sons at home, Danny and Joni quickly made childcare arrangements. His surgery took place just two days later.

As part of the surveillance period following the procedure, Danny worked with Nancy Ann Dawson, MD, a renowned expert in genitourinary cancer at MedStar Georgetown and Georgetown Lombardi Comprehensive Cancer Center, the Washington, D.C., region’s only National Cancer Institute-designated comprehensive cancer center, and the Institute’s research engine. Through this partnership, patients like Danny have access to groundbreaking clinical trials and the latest breakthroughs in cancer care.

Under Dr. Dawson’s care, Danny underwent regular CT scans to check for signs the cancer had returned. Two years later, imaging revealed it had—and spread to his abdomen as well.

“At this point, I knew this meant chemotherapy, and I also knew it wasn’t feasible to head into the city daily for treatment,” said Danny. “Luckily, with a nurse in the house, I already knew we were fortunate to have great options here for local care.”

Joni, a nurse at MedStar St. Mary’s Hospital, was familiar with the hospital’s many services close to home. Danny soon met with Amir M. Khan, MD, board-certified oncologist and medical director of MedStar Georgetown Cancer Institute at MedStar St. Mary’s, who was already collaborating with Dr. Dawson on Danny’s plan of care.

“Dr. Khan is very knowledgeable and so great at what he does,” Danny said. “I felt I was getting the same level of personalized treatment here as we were at MedStar Georgetown.”

Chemotherapy at MedStar St. Mary’s began in February 2020. Danny was set for four cycles, each lasting three weeks—but the plan paused as Danny soon fell ill after the first treatment, growing feverish with chills. He was hospitalized for a week after developing leukopenia, a low white blood cell count that is often a side effect of chemo. White blood cells act as a defense for the human body—and with so few, Danny couldn’t easily fight off infection.

Then the COVID-19 pandemic arrived.

“I was immunocompromised due to the chemo, so of course we already had limited exposure to everybody,” Danny said. “Still, it was scary. We were all cautious. My wife was very, very cautious.”

Through the anxiety of that time, there were still some silver linings. When Danny’s 34th birthday fell on a weekday during a chemo cycle, he arrived to find a specially-decorated treatment bay set up just for the occasion. “Those are little things that mean a lot,” he said. “The whole team there is fantastic. As soon as you come in, you’re treated like family.”

Danny wrapped up his final treatment in April 2020. He continues to undergo regular testing for signs of recurrent cancer, but he is feeling great—back to running after his 6- and 7-year-old boys, assisting with their virtual learning, and working nights while wife Joni cares for patients alongside a team of compassionate oncology nurses.

One of whom happens to be a recent cancer survivor herself.
Stay on top of your health

- **Schedule regular check-ups.** Routine physicals can help keep your health on track. In addition to a general check-up, your provider will likely check your weight and blood pressure, review your medications, and order bloodwork for your glucose and cholesterol levels.

- **Share your family history.** Depending on your lifestyle and age, a family history of disease may lead to earlier recommendations for screenings such as colon, prostate, or lung cancer.

- **Exercise.** At least 30 minutes a day is ideal, but even short bursts of activity—a quick walk around the neighborhood, time spent on yardwork—will benefit your heart and relieve stress.

- **Protect your skin.** When outside, cover exposed skin with sunscreen (SPF 30 or higher), wear protective clothing, and take breaks in the shade. See a dermatologist annually, or when you notice new or unusual moles. Conduct monthly skin checks for the same.

- **If you smoke, quit.** Tobacco use and secondhand smoke exposure can lead to chronic obstructive pulmonary disease (COPD), emphysema and heart disease, plus many types of cancer. Talk with your provider about resources to help you quit for good.
The 54-year-old discovered a lump in her breast in March 2018. At work the next morning, she shared her concern with Dr. Khan. Subsequent scans and testing confirmed a mass. Teresa met with Patricia Wehner, MD, board-certified surgeon and attending physician in the MedStar Breast Health Program at MedStar Washington Hospital Center, who has a practice at the MedStar Women’s Specialty Care office in Leonardtown.

After a biopsy, Dr. Wehner soon called to confirm what the nurse herself suspected: she had breast cancer.

“Like anyone, I was overwhelmed,” Teresa said. Her maternal grandmother and aunt had battled the disease, and she had seen firsthand that cancer impacts people from all walks of life. But the mother of two, then 52, still felt stunned. Teresa was diagnosed with triple negative invasive ductal carcinoma, a particular type of breast cancer that can grow and spread faster than other types of the disease. Triple-negative breast cancer accounts for 10 to 15% of all breast cancers, with treatment options limited by the fact that the cancer cells don’t have estrogen or progesterone receptors, which can be targeted with therapies, and don’t make much of the protein HER2 (triple-negative).

It was time to fight back. Teresa returned to Dr. Khan to strategize.

“Dr. Khan is always looking at what’s best for the patient,” said Teresa. “During our first ‘official’ meeting, based on the type of breast cancer I had, he suggested going to MedStar Georgetown for a clinical trial through the hospital’s research partner. At first, I was disappointed because I work with an amazing group of nurses and I know what great care we deliver here. But I knew I’d be in excellent hands.”

With the support of her husband, Dave, Teresa did her own research on the clinical trial for an antibody drug used in immunotherapy. The medication had proven effective in shrinking the tumors associated with other cancers, but its ability to fight breast cancer was still under review.

“I know how much valuable information researchers get from these trials, and what it can do to advance treatment for other patients,” Teresa said. “With Dr. Khan’s support, I agreed to join.”

Following 12 weeks of chemotherapy, Teresa began treatments of an antibody infusion medication at MedStar Georgetown. Her emotions at the time ran the gamut.
“I was anxious to get started,” Teresa said. “Then, after the first dose of chemo with the clinical trial drug, an MRI showed almost total resolution of the tumor in my breast. At that point, I was excited about the results, but hesitant because I knew how bad side effects could get. Still, I was hopeful.”

Dave stayed steadfastly by Teresa’s side—an especially challenging journey after the loss of his father to lung cancer just two years before. Teresa’s daughter and son, both in their thirties, stayed upbeat. “They reminded me of what I’ve been telling them for years: that patients live with cancer and overcome it all the time,” said Teresa. “Their attitude was always, ‘Mom, you’ll beat this.’”

After the conclusion of the clinical trial, Teresa returned to MedStar St. Mary’s with relief. She would be close to home while following the standard of care for triple-negative breast cancer as outlined by Dr. Khan and Claudine Isaacs, MDCM, FRCPC, co-director of the Breast Cancer Program and medical director of the Jess and Mildred Fisher Center for Hereditary Cancer and Clinical Genomics Research at the Georgetown Lombardi Comprehensive Cancer Center. Drs. Isaacs and Khan stayed in frequent communication on Teresa’s treatment.

Sherry Wolfe, RN, OCN, Teresa’s longtime coworker and friend served as her primary nurse. “Sherry was comforting to me, but maybe even more so for my husband,” Teresa said. “She encouraged Dave to voice his concerns and ask questions, which gave him confidence that he really could help care for me. And when I was in that chair, she treated me like a patient, but also acknowledged that I knew some of what to expect. Working with all of these nurses for so many years, I knew I was in good hands.”

Teresa’s story is one of gratitude and success: she is now in remission. She feels well and continues to undergo regular scans and check-ins with her oncology team.

As a full-time nurse, Teresa now assists patients where she sat in triage herself not long ago. Danny Holdsworth was among those she cared for after returning to her duties. “I’ve gained so much knowledge from my patients over the years,” Teresa said. “There were still some surprises, though. I was really surprised by how much my head hurt when my hair fell out. No one had ever told me that. Now I know this is a side effect, and something patients might deal with, so I can reassure them.”

More than anything, Teresa has firsthand knowledge of the cancer experience that has translated into even deeper empathy for patients and their families. “Now I’ve sat in that chair,” she said. “I’ve been there. And I can really walk with them.”

About MedStar Georgetown Cancer Institute

MedStar Georgetown Cancer Institute combines medical expertise, the latest therapies, and research across MedStar Health. Georgetown Lombardi Comprehensive Cancer Center—the Washington, D.C., region’s only National Cancer Institute-designated comprehensive cancer center—serves as our research engine. This partnership allows you access to cutting-edge clinical trials and the latest breakthroughs in cancer care.

Nationally-recognized doctors offer screening, prevention, research, diagnosis, treatment, personalized rehabilitation and survivorship programs at multiple locations, close to where you live and work. Our experts specialize in the particular type of cancer you have, and work together to develop a customized care plan targeting your unique cancer. This often leads to better outcomes, and more importantly, hope.

Visit MedStarGeorgetownCancer.org to learn more.
Meet our new medical professionals.

Don’t skip a beat when it comes to cardiac rehab

MedStar St. Mary’s Hospital is expanding access to its cardiac rehabilitation programs by offering a new virtual option in addition to our in-person option offered with COVID-19 precautions in place.

“For patients who are reluctant to participate in an in-person program, our virtual program provides at-home guidance and support to help them recover,” said James Farrar, MS, EPC, CES, Clinical Lead, Clinical Exercise Physiologist with the Grace Anne Dorney Pulmonary & Cardiac Rehabilitation Center (GADC) at MedStar St. Mary’s Hospital.

GADC programs are designed specifically for patients who have recently suffered a heart attack or had cardiac surgery, or who have chronic obstructive pulmonary disease (COPD). The virtual program allows patients to participate in the center’s programs from their homes with a smartphone or computer.

“Recent studies have shown that virtual rehab programs can be very effective for cardiac rehab patients,” said James. “We know our programs make a tremendous impact in the lives of our patients and we are excited to take this virtual leap to help our patients in their recovery process.”

Visit MedStarStMarys.org/GADC for more information or call the center at 240-434-7143. A physician referral is required for the program.

Jude Alexander, MD
Psychiatry
Employed by: AXIS Healthcare Group
Medical school: University of Miami School of Medicine

Brent Keaner, DO
Emergency Medicine
Employed by: U.S. Acute Care Solutions
Medical school: Michigan State University

Jade Naylor, PA
Psychiatry
Employed by: AXIS Healthcare Group
Medical school: Howard University

Denise Eldridge, NP
Pediatrics
Employed by: Robert E. Miller, MD, FAAP, PA
Medical school: Drexel University

Betsy Lee, MD
Emergency Medicine
Employed by: U.S. Acute Care Solutions
Medical school: Albert Einstein College of Medicine

Ikwunga Wonodi, MD
Psychiatry
Employed by: AXIS Healthcare Group
Medical school: University of Port Harcourt

MedStar St. Mary’s Hospital is pleased to introduce the newest members of our medical staff. We strive to bring high-quality physicians and specialists to Southern Maryland to meet our community’s needs close to home. For a full list of local MedStar Health provider resources, visit MedStarStMarys.org/Community or MedStarStMarys.org/FindADoc for individual doctor profiles.
Ear, nose, and throat specialist Frank Chen, MD, discusses a condition that nearly 30 million people in the United States are diagnosed with each year—sinusitis, or sinus infection. Now practicing in Leonardtown, Dr. Chen offers insight into a common condition that, if left untreated, has the potential to cause serious complications.

Q. What is sinusitis, its causes, and symptoms?
Sinusitis, or rhinosinusitis, is an inflammation of the nasal cavity and the paranasal sinuses, the group of four, paired, air-filled spaces surrounding the nasal cavity. Caused by viral upper respiratory infections, bacteria, and noninfectious conditions, symptoms of sinusitis may include a runny nose, nasal congestion, facial pain and pressure, headaches, post-nasal drip, sore throat, cough, and bad breath.

Q. How are people diagnosed with sinusitis?
Sinusitis can be diagnosed through an in-depth discussion of the patient’s history and a physical examination that often involves a nasal exam. A nasal endoscopy—an in-office procedure using a flexible tube with a tiny camera and a light—may also be performed. Your doctor will look for signs of swelling, congestion, and infection; the shape and size of your nasal passages; and obstruction resulting from a deviated septum.

Additional laboratory testing and computed tomography (CT) imaging may be ordered. Allergy testing and immune function testing may be needed to diagnosis underlying conditions in patients with chronic sinusitis.

Q. Are some people more likely to get sinusitis?
People with certain underlying illnesses are prone to getting sinusitis including those with allergies, asthma, cystic fibrosis, and patients who are immunocompromised or who have ciliary dyskinesia, a genetic condition affecting the respiratory system.

Q. What treatments help with chronic sinusitis?
Treatments typically include conservative, watchful waiting or oral antibiotics. For people with chronic sinusitis, a nasal saline spray, topical steroid, and systemic steroid therapy may be prescribed. In certain situations, sinusitis may require surgery to remove infected tissue and open the sinus drainage pathway. Sinus surgery is typically performed using endoscopic techniques with imaging guidance.

Q. What happens if sinusitis is left untreated?
Without treatment, the infection can extend beyond the sinuses and lead to severe complications including infections of the tissues surrounding the eye or the mastoid bone behind the ear; abscesses around the eye or in the brain; and—in rare cases—blood clots in the vein running from the brain to the back of the eye. These complications typically will require urgent evaluation, IV antibiotics, and surgical interventions.

Frank Chen, MD
MedStar Medical Group ENT at St. Mary’s
25480 Point Lookout Road
Leonardtown, MD 20650
P 301-475-1555

Dr. Chen is now accepting new patients! Call 301-475-1555 for more information or to make an appointment.
Barbara Magrogan had had enough. For the past year and a half, Barbara endured continuously worsening shoulder pain that was robbing the active 71-year-old of the ability to enjoy most of her hobbies—horseback riding, kayaking, and wildlife photography. “My shoulder was bothering me for a long time. About a year ago, it really came to a head,” said Barbara, who had rotator cuff repairs on both shoulders performed by a previous doctor. “I knew what was going on, I just didn’t realize it was that bad until I was trying to kayak last spring and ride horses. And I kept telling my husband, ‘It just doesn’t even feel like it’s connected.’”

A recommendation from a friend led her to MedStar Orthopaedic Institute in Leonardtown and orthopaedic surgeon John A. Kuri, II, MD. “I loved him the minute I met him,” said Barbara. “I know my body really well and when I sat down and told him, ‘I’m crying uncle, I need your help, I just can’t live like this any longer,’ he said, ‘We are going to fix you.’ It is a lot to trust a brand-new doctor (to the area), but we had a good connection and that doesn’t happen very often.”

An X-ray and MRI confirmed what Barbara was feeling—there was extensive damage to her shoulder. By the time Barbara Magrogan met John A. Kuri, II, MD at MedStar Orthopaedic Institute at Leonardtown, she could barely lift her camera. Following surgery to repair a shoulder injury, she now has a second shot at enjoying her hobbies such as photographing birds visiting the feeder in her yard.
and surgery would be necessary to alleviate her pain and get her back to her busy life. The condition was most likely the result of an accident about a year prior during which a horse penned Barbara in a trailer, bruising her ribs on the right side and cracking her sternum. She later realized her shoulder was injured at that time as well.

“It was caused by a trauma and then I continued to use it and it just deteriorated and deteriorated until it got to the point where I said, ‘Stop, I can’t do this anymore,’” said Barbara.

Barbara underwent surgery in October 2020 during the COVID-19 pandemic, which turned out to be a blessing in disguise for her. A horse show judge for 50 years, Barbara’s normally busy travel schedule was put on hold during the pandemic giving her time to attend physical therapy and concentrate on her recovery. And she was never worried about having the procedure during the pandemic.

“It was all because of how relaxed Dr. Kuri made me feel about it,”

said Barbara. “He is very mellow, and he listens, and takes whatever time you need. I was looking forward to the surgery, I wanted it to be all over.”

After four months of physical therapy, Barbara was nearly back to normal this spring and was released from Dr. Kuri’s care in April.

“This time a year ago, I couldn’t kayak anymore, I couldn’t hold my camera, I couldn’t do anything,” said Barbara. “I am extremely active—I don’t stop.”

Dr. Kuri told her she needed to follow all of the post-operative, rehabilitation protocols and be careful with her activities while she healed.

“I did exactly what I was told and now I am back,” said Barbara. “Dr. Kuri gave me my life back.”

More space, more services, more convenience.

MedStar Orthopaedic Institute at Leonardtown has expanded its practice and its ability to better meet your needs. With more than 5,000 square feet of space, the new office in the Davis Professional Park at 23503 Hollywood Road, Leonardtown, offers spacious offices and exam rooms and in-office X-ray, which means you only need one appointment in one location to have a complete orthopaedic consultation. Plus, it’s ground-floor location makes it easily accessible—no complicated stairs or elevators for patients with limited mobility.

Come see us at our new location!

Visit MedStarStMarys.org/Ortho for more information or call 240-434-7483 to make an appointment.

MedStar Orthopaedic Institute has more than 40 orthopaedic surgeons practicing at locations throughout D.C., Maryland, and Virginia. Visit MedStarOrthopaedicInstitute.org for a complete listing of physicians and corresponding locations.
Pelvic Rehabilitation

Therapy helps improve quality of life by addressing pelvic floor dysfunction.

Partnering for pelvic health.

Some medical issues are just not easy to talk about.

“It takes courage to come in and sit down with a stranger and talk about these things,” said Robin R. Remaly, MsEd, MPT, a therapist with the Pelvic Rehabilitation Program at MedStar St. Mary’s Hospital. “But most people will say, ‘This has been a really positive experience for me.’”

That is true for Deanna Gleisner of Hollywood, Maryland. Deanna sought out pelvic floor therapy following a routine OB/GYN visit during which she was diagnosed with a prolapsed bladder. An active 65-year-old trying to stay healthy and keep up with her grandchildren, Deanna wanted to take action to prevent future surgery.

“After my daughter had her babies, she went to Robin to strengthen her pelvic floor. She talked about how that made such a difference for her,” said Deanna. “I am just one of those people that I would prefer not to have surgery; I would rather do something more natural to stop it from going in that direction.”

“We treat a variety of issues with the bowel and bladder including incontinence, urgency, and constipation,” said Robin. “Each person is unique and presents a little like a puzzle, as typically patients present with more than one issue at the same time. Fortunately, more often than not, as one issue resolves, so do the others.”

Regardless of the diagnosis, the therapists will take time to get to know the individual and talk with them about the issues they are facing. The program takes a whole person, individualized approach to address the patient’s specific issues.

“We try to make their first appointments as comfortable as possible—we’re going to use the formal names of things, we assure them we are here for them, we are going to answer questions, and give them education,” said Robin. “The first 15 minutes of their first visit we let them know this is going to be OK.”

Deanna said her visits with Robin involved a lot of education—not just about the pelvic floor—and helped her develop strategies that enabled her to handle her feelings of urgency. During therapy sessions she was taught exercises to help strengthen her pelvic floor muscles that complemented her already established exercise routine.

“We went over exercise, eating, drinking, my habits, and from there Robin gave me an education about the muscles on the pelvic floor, and core muscles,” said Deanna. “I learned a great deal about foods that irritate the bladder, how much I should be drinking, exercises I was already doing, and how to incorporate new exercises.”

Deanna says the Pelvic Rehabilitation Program has made a big difference in her day-to-day life—she no longer feels panicked and rushing to the bathroom.

“It is very much a partnership, that’s why I feel it has been so positive,” said Deanna. “The amount of education I have gotten has been incredible.”

Visit MedStarStMarys.org/PelvicRehab for more information or call 301-475-6062.

Deanna and Dave Gleisner of Hollywood, Maryland, pictured with six of their seven grandchildren. Deanna received help from the MedStar St. Mary’s Hospital Pelvic Rehabilitation Program.
Surgery helped her lose the weight.

Determination has kept it off.

Jessie Cardello first heard about bariatric surgery years ago—years through which she tried many diets while trying to shed the extra weight she’d carried since childhood. Years in which, happily, she’d also married and welcomed four children.

“After having my first baby, I was up to 275 pounds,” said Jessie, of Hollywood. “I worked hard to get down to 180 with diet and exercise. But after three more children, I couldn’t stay below 220.”

Jessie connected with Nicholas Tapazoglou, MD, board-certified general surgeon and fellowship-trained bariatric surgeon at MedStar St. Mary’s Hospital. She also began attending the hospital’s monthly Bariatric Support Group meetings.

Jessie ultimately chose to undergo a gastric sleeve procedure. The minimally-invasive, laparoscopic surgery involves removing parts of the stomach to form a smaller “sleeve”—about 1/10th the size of the original stomach. Patients must eat much less and will feel full much quicker. The months-long preparation program includes education, dietitian appointments, and rigorous physical testing.

Surgery day finally arrived in December 2018. “My recovery went smoothly,” said Jessie. “Dr. T’s skills as a surgeon made the healing process easier. I only had three tiny incisions, and no scars.”

Two and a half years later, Jessie is maintaining her weight at 140 pounds—75 pounds down from surgery, and 135 pounds less than her heaviest point. “Bariatric surgery is a tool, not a quick fix—a decision that requires daily commitment,” she said. “I’m so thankful for this tool.”

With the support of her family, bariatric coordinator Michelle McDonald, and Dr. Tapazoglou, Jessie continues to feel confident in having made that choice. She is also grateful for new friendships formed through the Bariatric Support Group. “I really appreciate being able to connect with other patients—sharing advice and helping each other stay on track,” she said.

“Healthy eating will always need to be a conscious choice if I want to keep the weight off,” Jessie said. “But my family keeps me motivated. Teaching my children healthy habits is important to me.”

Bariatric surgery is a personal choice, she shared. “Personally,” said Jessie, “it’s the best decision I’ve ever made.”

“Weight loss and weight management will always be very hard work, whether or not you have surgery,” said Dr. Tapazoglou (pictured). “But if you are suffering from health consequences of being overweight, surgery can be a safe and effective way of reversing many conditions—or preventing them in the first place. I encourage patients to view our informational seminars or speak with other bariatric patients. If a patient has truly explored non-surgical weight loss options and not been successful, surgery can be a powerful tool.”

Ready to take a step toward a new life? Visit MedStarStMarys.org/Bariatrics to learn more, or call 240-434-4088 to make an appointment with Dr. Tapazoglou.
Soaring, not sinking.

COVID-19 patient returns to thank staff for life-saving care one year after discharge.

Nearly one year to the day since his discharge, Rick Dressler—one of the first two COVID-19 patients admitted the same day to MedStar St. Mary’s Hospital—returned to thank the staff for their roles in saving his life.

Rick, 52, was traveling home from overseas military service when news reports of a fast-spreading coronavirus were gaining international traction. While COVID-19 was inching closer toward being declared a pandemic, the father of two was among thousands of travelers at a busy Amsterdam airport in March 2020.

Back in Valley Lee, Rick soon fell ill—experiencing debilitating migraines and terrible chills. His wife, Susan, tried to help by running him a warm bath. She said she’d added potent aromatherapy oils, but Rick discovered an alarming new symptom: he couldn’t smell a thing.

Next came the joint pain, “like someone drilling into my bones,” he described. Then kidney pain, exhaustion—just terrible fatigue. “It felt like if someone dropped you at 20,000 feet without oxygen, then made you walk and try to accomplish tasks,” recalled Rick, a trained medic. “It wasn’t happening.”

The splitting migraines were what ultimately forced Rick to seek relief at MedStar St. Mary’s Hospital’s Emergency Department (ED) in March 2020. The team swabbed him for coronavirus, but results early on could take a week or longer to process. He went home to rest and wait.

Rick’s condition worsened. Three days later, Susan rushed her husband back—he’d begun to cough up blood.

“Like so many people during the pandemic, my wife had to just drop me off,” Rick said. “I was worried about infecting my family, if I hadn’t already. We didn’t even hug—just kind of fist-bumped. I said I hoped I’d see her again.”

A CT scan revealed Rick’s lungs were severely compromised. Healthy just weeks earlier, Rick soon woke up on a ventilator in the Intensive Care Center...
Jean Pierre El Khoury, MD, and Bruce Gibson, MD, intensivists at MedStar St. Mary’s, directed Rick’s care at a time so much remained unknown—but testing confirmed he was, indeed, COVID-positive. As Rick struggled to breathe and move for himself, he remembers the compassion of the entire staff—from the ED, to anesthesia, to associates in Environmental Services who brought “positive energy” into his room daily, even through their layers of PPE. “Stem to stern, everyone was so kind and helpful,” said Rick. “The staff was great about keeping my wife updated. But I was in a bad place. Just bleak. I remember Dr. El Khoury coming in to ask how I was doing, and I was frank: I said well, I’m tunneling out. I’m dying.” Rick was intubated again and placed back on a ventilator. But Rick’s ravaged body fought back. Removed from the ventilator days later, he defied the odds and began breathing on his own. After eight harrowing days in intensive care, he was well enough to continue his recovery at home with Susan and their sons on April 4, 2020. In the year since, Rick hasn’t forgotten the service of the entire MedStar St. Mary’s team. He returned in April to extend his gratitude and see their smiling eyes above masks once again. Among the staff present were members of the nursing and respiratory therapy teams who cared for Rick around the clock last spring, charging his cell phone and trying to keep his spirits up. “I’m so grateful to all of you,” Rick told the team, which included nurses Betty Porter, BSN, RN, Katie Smith, RN, and Jennifer Sams, BSN, RN; respiratory therapists Suzanne Abell, RRT, RRT-NPS, RRT-ACCS and Kristin Rohrer, RRT; and Dawn Yeitrakis, MS, BSN, RN, NEA-BC, CEN, vice president and chief nursing officer. “God has a plan for me—I haven’t quite figured out what it is yet. But I’m here because of you.” In addition to generously sending meals for the staff, Rick and his family gifted the team a plaque featuring photos of two bald eagles he’d spotted on the Potomac River: one plunged into deep water, the other with wings opened wide against a clear blue sky. “Even an eagle can be in trouble, sinking not soaring,” he wrote. “Thank you for saving my life and helping me soar again.”

Gratitude matters to you and to us. Visit MedStarStMarys.org/Philanthropy to learn more about the power of gratitude for our healthcare workers, or to thank an associate who has made a difference to your family.
“As a first-time mom, I had high hopes for what my birth would be like. I had the picture-perfect plan, had done my research and knew everything I wanted. But life of course happened, and my entire birthing experience became a situation of pure fear and panic, and ended in an unplanned c-section. I felt defeated and like I was grieving something. When I reached the postpartum side I had the same nurse, Sharon, both days. Her caring and empathetic nature, along with her quick responses and quality patient care, began to give me back some of the joy I felt had been lost. She made me feel cared for on a deeper level and as if I wasn’t just another patient to monitor. I will always be thankful for the care Sharon provided when I was feeling pretty defeated.”

-Emily Simmons, Lexington Park

“Thank you to the staff and doctors for excellent service. I recently came to St. Mary’s for rotator cuff surgery and was treated very well by all the staff, including Dr. Kuri, Tina Williams, Ashley B., Rosemary, Valerie McKay, Yhamira, Hollie, Rachel, and Maria. Given the times we are currently experiencing, I did not expect to get the personal care that was provided to me. Because of the excellent care and performance of the surgery team, my recovery is going better than expected. Thank you all for your work ethics and taking care of me so well.”

-Thomas White, Leonardtown

“I was brought in by ambulance and admitted to the ER due to an allergic reaction. It was later in the day I was fully aware of what was going on with me. Melinda was my attending nurse that evening. Melinda is a true healthcare professional, it is because of people like her healthcare professionals are held in high esteem. Melinda took the time to explain to me what was going on with me and called my wife multiple times to update her on my status. I knew Melinda was very busy since I saw her back and forth, but she made me feel like I was her primary concern. Thanks Melinda, you’re awesome!”

-Paul Powell, Lexington Park

Patient feedback fuels decisions at our hospital and throughout MedStar Health. Turn to the back cover to learn more, or visit MedStarStMarys.org/Feedback to share your experience.
Jessica Roberts, BSN, RN, nurse and clinical coordinator on the Telemetry unit was recently honored as the 2021 Peabody Award of Excellence winner at MedStar St. Mary’s Hospital! Jessica was chosen from among the exemplary associates who received recognition for going above and beyond in 2020.

“Without hesitation, colleagues describe Jessica as someone who truly puts the ‘I’ for Innovation in our MedStar Health SPIRIT values,” said Christine R. Wray, FACHE, president of MedStar St. Mary’s Hospital. “She is detail-oriented, compassionate, and always searching to do what is best for our patients.”

During COVID-19, Jessica helped establish Telemetry as an expansion of the Intensive Care Center to accommodate patient acuity and increasing demands. This provided flexibility and options for patient care at a time when the hospital census—and stress levels—were high. She was instrumental in sharing rapidly-changing protocols and precautions with the nursing staff, and developed job aids to educate nurses on the management of newly-approved medications during the pandemic.

Jessica seeks out ways to deliver more efficient, patient-centered care by never settling for the status quo. She served as a subject matter expert and superuser during our hospital’s recent transition to MedConnect, MedStar Health’s electronic health record, and continues to be a go-to resource for colleagues. Jessica also leads by example, serving as a mentor for new-to-practice nurses.

The annual Peabody Award is named for the late Elinor Peabody, dedicated volunteer with the St. Mary’s Hospital Auxiliary and advocate of our community hospital. The honor is typically announced during the annual Associate Awards Banquet in May. During COVID-19, Jessica’s award was celebrated in an online presentation on behalf of the Auxiliary.
Summer 2021 calendar

Class availability is subject to change, particularly during COVID-19. After enrolling, you will be notified should a session need to be postponed. Because no registration is required for support groups, please reach out using the phone numbers below to verify if meetings are still scheduled.

Support groups

Bariatric Support
Meetings are currently online only June 12, July 10, Aug. 14, 10 a.m. Call 301-475-6019.

Breastfeeding
Meetings are currently online only Weekly on Wednesdays, 10 a.m. to noon, Search and join “MedStar Breastfeeding Support Group” on Facebook

Breast Cancer
Meetings are held in person on the last Monday of each month June 28, July 26, Aug. 30, 6 to 7 p.m., Outpatient Pavilion, Cancer Care & Infusion Services Call 301-997-1315 or visit Facebook.com/groups/MedStarBreastHealthProgram

Epilepsy

Ostomy Care
Currently on hold due to COVID-19. Call 301-609-5435 for updates.

Parkinson’s
Second Tuesday of each month, June 8, July 13, Aug. 10, 6 p.m., Health Connections Call 301-475-6019.

Stroke Survivors
Third Tuesday of each month, June 15, July 20, Aug. 17, 5:30 p.m., Health Connections Call 301-475-6019.

Senior wellness & events

Senior Gold Card luncheon
Currently on hold due to COVID-19. Call 301-475-6019 for updates.

Cancer care
Cancer Support group
Currently meeting virtually on the first and third Wednesday of each month. Call 240-434-7241 to register.

Diabetes education

Take Control of Diabetes with Education
MedStar St. Mary’s Hospital offers American Diabetes Association (ADA)-recognized programs to individuals and groups. Services are covered by Medicare, Medicaid, and most private insurance plans.

Simple Changes (Pre-diabetes)
Meeting is held in person Oct. 6, 5:30 to 6:30 p.m., Health Connections 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.

Living Well with Diabetes
Meeting is held in person Sept. 14, 6 p.m., Health Connections This six-week workshop can help individuals with diabetes manage this condition, carry out normal activities, add healthy activities to their lives, and manage emotional changes. Call 301-475-6019

Health & Lifestyle Training (HALT)
Online-only, pre-diabetes prevention program Next cohort begins July 12 Participate in a free, year-long course designed to eliminate diabetes risk factors by making changes to your health and lifestyle! Call 301-475-6019.

Exercise, nutrition & weight management

Bariatric information sessions
Learn more about weight loss surgeries offered with surgeon Nicholas Tapazoglou, MD, with a free online seminar. Required for those pursuing surgery. Visit MedStarStMarys.org/WeightLoss or call 240-434-4088.

Body composition analysis
By appointment only, Health Connections Screening includes an in-depth look at body composition. Cost is $15. Call 301-475-6019.

MedFit program

Yoga
Currently on hold due to COVID-19. Call 301-475-6019 for updates.

Childbirth & family education
Classes are held in the Outpatient Pavilion at MedStar St. Mary’s Hospital.
One-day Parents-to-Be workshop
In-person sessions,
June 5, July 17, Aug. 7,
8 a.m. to 4 p.m.,
Health Connections, $100/couple
Combines four traditional
parenting classes into a one-day
overview. Topics include childbirth,
breastfeeding, infant CPR, and
practical baby care skills such as
bathing and diapering. Call
301-475-6019.

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
In-person session,
July 9, Aug. 13,
8:45 a.m. to 4 p.m.,
Health Connections, $65
Adolescents 12-14 learn
babysitting tips, basic first aid,
and CPR. Call 301-475-6019.

American Heart
Association classes
Held in MedStar St. Mary’s
Hospital’s Education and Simulation
Center, 41550 Doctors Crossing
Way, Leonardtown. Register at
sitelms.org with registration codes
(below). Two-year certification
cards are emailed upon course
completion. Call 202-643-1841
to learn more.
Please note: class prices are subject
to change.

CRT 105 CPR for the community
(Formerly known as Heartsaver
CPR/AED)
June 28, July 26, Aug. 23,
5 to 9 p.m., $85
Learn CPR and AED use on adults,
children and infants; and how to
relieve choking for any age.

CRT 109 CPR for the community
and First Aid
(Formerly known as Heartsaver
CPR/AED & First Aid)
July 10, Oct. 2,
9 a.m. to 4 p.m., $120
Video-based, instructor-led
course that teaches critical skills
to respond to and manage an
emergency in the first minutes
until Emergency Medical Services
arrives.

Overdose Response
Program
The St. Mary’s County Health
Department offers a free
Overdose Response Program to
train individuals on administering
Naloxone and caring for someone
until emergency help arrives. Visit
SMCHD.org/Overdose or call
301-475-6806.

Please note: all Health Connections
class fees are subject to change.

Blood drives return this summer
MedStar St. Mary’s Hospital will be hosting American Red Cross blood
drives on June 30 and Aug. 27 in Auxiliary Building #3, located in the front
parking lot of the main hospital.
To participate, you must make an appointment. Visit RedCrossBlood.org,
call 1-800-RED CROSS (1-800-733-2767), or call Health Connections
at 301-475-6019 to schedule your time.
Your feedback matters.

Please tell us how well we are caring for you.

If you recently received care at our hospital, you may receive a survey by phone, text, email, or mail asking about your stay. Your feedback helps us better serve you.

Surveys administered by Press Ganey Associates, Inc. All responses are confidential.

Managing your payments just got easier with our new One Bill.

MedStar Health’s new consolidated statement and payment portal system is designed to make bill paying easier. We have consolidated billing into one statement that includes the details for all hospital accounts and most physician balances that are the patient’s responsibility. Payment options include credit cards, payment plans, electronic check, PayPal, Google Pay, or Apple Pay.

Call 410-933-4966 or toll-free 1-844-817-6087 Monday through Friday 8 a.m. to 6 p.m. for help or information on the new billing statement.

Visit epay.MedstarHealth.org to view and pay a bill.