Those of us who make our homes in Frederick County know it’s a great place to live. Recently, nationwide surveys have confirmed what we’ve known for years, placing Frederick among the top 10 places to live in the United States.

What does it mean to be a great community? Among other things, it takes great schools, great services, and great healthcare. And when it comes to great healthcare, I’m proud—as you should be—that Frederick Regional Health System is leading the way.

We are working hard every day to make sure that our hospital practices, our patient outcomes, and our patients’ experiences are the best they can possibly be. In this issue of Well Aware, you will read about the high performance ratings, accreditations, and commendations earned recently by some of our busiest programs and services. These high marks earned from some of medicine’s most respected evaluators are an objective way that you can see at a glance: where you go for care matters.

Whether you need care now, know someone who does, or are just looking to stay informed about healthcare in your community, thank you for keeping in touch. Look to this publication to keep you up to date on many exciting new developments as we head into the next phase of healthcare in our community.

Yours in good health,
Tom Kleinhanzl
PRESIDENT and CEO
Frederick Regional Health System

Did You Know?
The First Floor corridor between the new Outpatient Services lobby (Green Entrance #1) and the rest of the hospital has been completed, opening up a direct pathway across the hospital. This corridor leads past the hospital’s newly renovated Gift Shop, which is fully stocked with snack foods, gifts, seasonal items, and sundries. The Gift Shop is a project of the hospital’s volunteer Auxiliary, and all profits go toward fulfilling their $1 million pledge in support of the James M. Stockman Cancer Institute. Read more about the Gift Shop and other fundraising projects of the FMH Auxiliary on page 9.
IMMEDIATE CARE vs. EMERGENCY DEPARTMENT

Where Should You Go?
For treatment of common illnesses and minor injuries, your first stop should be your primary care provider. Your family doctor already knows your personality, habits, and health history—a big advantage in diagnosing and treating your current medical issue.

But what happens if you’re out of town, or if your primary care provider is unavailable? If you have a non-urgent medical issue, chances are an Immediate Care Center can meet your needs. However, if you have an extreme medical condition, you need to go directly to the nearest hospital’s Emergency Department. Deciding whether to go to Immediate Care or the Emergency Department isn’t always simple, but a quick review of the types of conditions each option was designed to treat may help:

### When Should You Go to Immediate Care?
- Musculoskeletal injuries
- Back pain
- Broken bones
- Animal or insect bites
- Flu-like symptoms
- Sore throats
- Earaches
- Rashes without fever
- Suspected urinary tract or upper respiratory infections
- Travel vaccines
- Minor lacerations
- Sport/DOT physicals
- Other conditions where symptom onset has been gradual

### When Should You Go to the Emergency Department?
- Head or eye injuries
- Dislocated joints
- Deep cuts
- Fevers with rash
- Fevers in infants
- Severe abdominal pain
- Bleeding or vomiting that won’t stop
- Serious burns
- Any other condition you believe is life-threatening

### When Should You Call 9-1-1?
Don’t fight traffic to get to the Emergency Room for these symptoms. **Call 9-1-1 immediately!**
- Shortness of breath or difficulty breathing
- Any symptoms of a heart attack, including chest pain, pain in the left arm or jaw, sudden weakness, or dizziness
- Signs of a stroke, such as numbness, slurred speech, severe headache, weakness on one side of the face, or loss of consciousness
- Life or limb-threatening injury
- Any other condition you believe is life-threatening

“If you feel you may be experiencing a true medical emergency, go directly to the Emergency Department, or call 9-1-1,” said Dr. Sandra Parkinson, Medical Director of Immediate Care. “However, for many people with conditions that need to be treated promptly but are not emergencies, Immediate Care Centers offer a good, same-day option for appropriate, affordable treatment.”

For information on services offered by our Immediate Care locations, visit monocacyhealthpartners.org/immcare.
Lucky to Be Alive

Despite a history of heart disease in his family, 64-year-old Thurmont native Ted Ridenour had always enjoyed good health. His own risk factors for heart attack were low, and the former construction supervisor was enjoying an active lifestyle in retirement.

All that changed last December when Ted experienced a serious cardiac event called an “ST segment elevation myocardial infarction,” or STEMI. A STEMI is a particularly serious type of heart attack in which a coronary artery has become completely blocked and a large part of the heart muscle is unable to receive blood.

Ted recounts that he and his wife, Kay, were out Christmas shopping when he began to feel nauseated and short of breath. After getting home, his symptoms initially subsided but returned hours later with a vengeance. Kay called 9-1-1, and within moments EMS had arrived to take Ted to FMH.

Ted has little memory of that ambulance ride down Route 15, but what happened on the way to the hospital very likely saved his life. As soon as EMS personnel recognized that he was having a heart attack, they called the FMH Emergency Department from the field. This activated the Code Heart team as early as possible, putting everything in place to begin the emergency procedure immediately upon Ted’s arrival at FMH.

However, before the procedure could begin, Ted’s heart stopped completely. The team shocked his heart repeatedly to restore a rhythm, and because he was already in the cardiac catheterization procedure room, they were in a position to implant an emergency pacemaker and cardiac pump to keep his heart functioning. After he was stabilized sufficiently, the team opened a complete blockage in Ted’s right artery, restoring blood flow to his heart. Three days later, he was resting and recovering at home with very little damage to his heart muscle.

Several months after his recent heart attack, Ted Ridenour returned to FMH to thank Frederick EMS and the Interventional Cardiology team for saving his life. Pictured left to right: (front row) Frederick EMS Chief Mike Cole, Interventional Cardiology Supervisor Anne Morton, Erin Shover, Cody Humburg, Nicole Myers, Ann Marie Bowins, Catalina Alvear, Mr. Ridenour, Sue Calhoun, and Maggie Ramkisson. (back row) Program Director Kristen Fletcher, Shawn Kocher, Jim Varley, Wendy Cordell, Janet Custer, Laura Trumpower, Ronna Dixon, Dr. Chao-Wei Hwang, Jeff Garling, and Mike Marchone. Not pictured: Kristin Deely, Kristen Pickett, Sarah Breeden, Nancy Thrasher, Amanda Little, Ron Bugbee, and Amy Gordon.

Interventional Cardiology is a specialized branch of cardiology that treats coronary artery disease with balloon angioplasty and stenting. When an artery that supplies blood to the heart is blocked, an interventional cardiologist threads a small, flexible tube called a catheter with a deflated balloon on the tip to the blockage. At that point, the balloon is inflated, pushing open the blockage. A stent is then inserted to prop the artery open, restoring blood flow to the heart.

FMH AND EMS: TEAMWORK SAVES LIVES
Time is Muscle

During a heart attack like the one Ted Ridenour had, there is a blockage in one of the arteries that carries oxygen-rich blood to the heart, causing life-threatening rhythms, muscle damage, and death. The faster that blockage can be opened up, the better the patient’s chances are for survival and less permanent damage to the heart muscle.

The amount of time between a patient’s arrival at the hospital and the completion of the procedure that opens up the blockage and restores blood flow is called the “door-to-balloon” time. The American College of Cardiology recommends a door-to-balloon time of less than 90 minutes. FMH is currently beating that metric with a median door-to-balloon time of 53 minutes, and achieves the 90-minute benchmark 100 percent of the time.

According to Dr. David Brill, co-director of the hospital’s Interventional Cardiology program, the collaboration among EMS, the hospital’s Emergency Department and the FMH Interventional Cardiology team has helped earn FMH some of the highest quality metrics not only in the state, but in the nation.

“FMH has been ahead of the curve every step of the way with regard to reducing door-to-balloon times,” said Dr. Brill, “and the pre-activation of the Code Heart team by EMS from the field has been at the center of that. There’s no doubt about it: time is muscle, and the speed and efficiency with which the FMH team is able to open up a blockage and restore blood flow to the heart is reducing muscle damage and saving lives.”

“FMH Interventional Cardiology is a remarkable program. The commitment to excellence and the dedication of the FMH team are unmatched. Frederick is very lucky to have this program here.”

– Dr. Chao-Wei Hwang
Interventional Cardiologist

Dodging a Bullet

They call it the Widowmaker, and it’s just as serious as it sounds. It’s a certain type of heart attack in which the artery that supplies a large portion of the heart with oxygen becomes completely blocked. As far as heart attacks go, this is the big one—with catastrophic consequences if not dealt with quickly and appropriately.

The good news is that the name “Widowmaker” is fast becoming inaccurate. If blood flow can be restored quickly, the outcomes are far more favorable than ever before. In addition, the term implies that this cardiac event happens only to men with catastrophic results. That’s not true. Women can also be affected by this most serious of heart attacks.

Just ask Tricia Morton of Mt. Airy. In 2013, Morton learned the benefit of having an excellent Interventional Cardiology program nearby in a way that she and her family will never forget. To read more about her experience, visit blog.fmh.org and search Tricia’s Story.
Everywhere you look, healthcare is changing. Physicians, hospitals, and other providers are coming together to help assure that patients receive the right care at the right time from the right professional—all the while avoiding duplication of services and spending healthcare dollars as wisely as possible. Locally, Frederick Regional Health System has created Monocacy Health Partners to help accomplish these goals.

Monocacy Health Partners (MHP) is an affiliation of practices representing primary care, family medicine, and a wide range of specialties. As members of the same umbrella organization, MHP member physicians and practices work together by sharing patient information, coordinating the need for diagnostic tests, conferring with one another about results, planning recovery and rehabilitation programs, and ensuring that all medicines prescribed are compatible with the overall treatment plan.

One of the newest practices to affiliate with Monocacy Health Partners is Internal Medicine Associates, a highly respected practice serving Frederick since the 1920s. As a Monocacy Health Partners member practice, Internal Medicine Associates has gained access to additional practice management features, including an electronic medical record system.

The busy practice has recently welcomed two new physicians: Dr. Bianca Udugampola-Stewart and Dr. Yassin Mohamed.

A board-certified internal medicine physician, **Dr. Bianca Udugampola-Stewart** completed her medical training in Internal Medicine at West Virginia University School of Medicine, West Virginia University Hospital. She worked at FMH as a hospitalist for seven years and specializes in wellness and preventive medicine, obesity medicine, and weight loss. Dr. Udugampola-Stewart lives in Frederick with her husband and two young children.

A board-certified internal medicine physician, **Dr. Yassin Mohamed** completed his Internal Medicine residency at Abingdon Memorial Hospital in Pennsylvania. He worked as an internal medicine physician at an Internal Medicine and Nephrology Clinic in Alabama for 10 years before moving his family to Frederick. Dr. Mohamed has a particular interest in diabetes, osteoarthritis, and men’s health issues.

For more information or to make an appointment at MHP Internal Medicine Associates, call 301-662-8119. To learn more about Monocacy Health Partners and its member providers, visit monocacyhealthpartners.org.
Another Monocacy Health Partners practice has also recently welcomed a new physician. Monocacy Health Partners’ Center for Chest Disease has recruited Board-certified thoracic surgeon Dr. Maurice A. Smith to join Dr. Mark Soberman at the helm of this comprehensive, multidisciplinary program.

The Center for Chest Disease is dedicated to the early detection, diagnosis, and treatment of benign and malignant diseases of the organs in the chest. Its physicians are experienced in a variety of surgical approaches, including robotic thoracic surgery, VATS (Video-Assisted Thoracic Surgery), endobronchial ultrasound, interventional bronchoscopy, and ENB/SuperDimension® (Electromagnetic Navigation Bronchoscopy).

The Center also offers a special program for patients diagnosed with cancers of the organs of the chest, including the lungs, esophagus, and mediastinum. In addition to Dr. Soberman and Dr. Smith, the care team may include pathologists, diagnostic radiologists, medical and radiation oncologists, and social workers to assist with the emotional and practical concerns related to a cancer diagnosis. All care is coordinated by the program’s Thoracic Nurse Navigator, a highly-trained and experienced professional who can answer questions, schedule appointments, and assure that all studies and tests are complete and reviewed promptly.

“We are pleased to welcome Dr. Smith to Monocacy Health Partners’ Center for Chest Disease,” said Dr. Soberman. “When people are faced with a serious disease, having the right doctors with the right expertise makes all the difference. Having your doctors work collaboratively on the same team is a real game changer.”

If you or your doctor thinks you might benefit from seeing us at the Center for Chest Disease, call our Thoracic Nurse Navigator at 240-566-4559.
NEW CANCER INSTITUTE NAMED FOR JAMES M. STOCKMAN

On February 19, 2016, lifelong Frederick resident James M. “Jim” Stockman stepped forward with a gift of $3 million to The Time is Now campaign. Stockman’s donation, the largest non-estate gift in the hospital’s history, will be used to help provide a new home for the award-winning FMH cancer care program. In recognition of his extraordinary generosity, the facility, scheduled to open in the summer of 2017, will be called the James M. Stockman Cancer Institute.

“The new James M. Stockman Cancer Institute will touch many lives in Frederick in the years to come and will have a far-reaching impact on cancer care in the region. It seems only fitting that the individual whose name it will bear is a Frederick native and a lifelong resident. On behalf of a grateful community, we thank Mr. Stockman for his extraordinary generosity.”

– Tom Kleinhanzl, President and CEO
Frederick Regional Health System

Located on the hospital’s Rose Hill campus, the James M. Stockman Cancer Institute will allow FMH to continue providing local residents with high quality, patient-centered cancer care in an environment that is even more convenient, comforting and healing. At nearly twice the size of the existing facility, the new Cancer Institute will house everything that patients fighting cancer and their families need—all under one roof, in one, convenient, easily accessible location.

Visit blog.fmh.org and search Cancer Care to learn more about the James M. Stockman Cancer Institute. To make a gift in support of this project, visit fmh.org/cancer.
The FMH Auxiliary has made a five year, $1 million pledge in support of the James M. Stockman Cancer Institute.

The volunteers of the FMH Auxiliary bring warmth, comfort and hospitality to our patients, visitors, and staff every day. In addition, this remarkable organization made the first signature gift to The Time is Now campaign, pledging $1 million to the effort.

The Auxiliary is raising the funds to fulfill this generous pledge with the proceeds from many different projects and events. Two of their largest projects are the FMH Gift Shop and the Select Seconds thrift store in Downtown Frederick. From purchasing to merchandising to staffing, both projects are run entirely by volunteers—lowering overhead and greatly increasing donations to FMH.

The FMH Gift Shop is located along the hospital’s recently opened main corridor connecting the Outpatient (Green #1) entrance with the rest of the hospital. The newly renovated gift shop is open 365 days a year, including Thanksgiving and Christmas, offering sodas and snacks, balloons and flowers for all occasions, toys and plush animals, an assortment of baby items to celebrate new arrivals, and many seasonal and gift items.

A familiar site at 8 East Patrick Street in Downtown Frederick for many years, Select Seconds thrift store carries good quality, second-hand clothing for women, men, children, and infants. Select Seconds also has collectibles, antiques, jewelry, small furniture items, books, toys, games, and gift items for sale.

Did you know? In 2015, 668 FMH Auxiliary volunteers contributed 85,098.75 hours of service. Interested in learning about the many volunteering opportunities at FMH? Call 240-566-3567 for more information.
A BETTER LIFE WITH DIABETES

No one said managing diabetes was going to be easy, but it is possible—especially with a team of professionals at your service. At the Center for Diabetes and Nutrition Services at FMH Crestwood, you’ll find compassionate people and supportive programs, all designed to help you live a healthier life.

Preventing the Disease
An estimated 86 million people in the United States have blood sugar levels that are higher than normal, but do not have diabetes. The bad news is that without lifestyle changes to lower their risk and improve their health, 15-30 percent of these people will develop diabetes within five years. The good news? Simply by making several minor lifestyle changes, these patients can prevent or delay the onset of the disease. A one-on-one consultation with one of our dietitians is a good way to learn some of the things you can do to head off diabetes, and how you can use the resources available through the Center.

Living with Diabetes
We take time at your initial consultation to really get to know you—your personal routines, history, and challenges. Next, to help you understand the different aspects of diabetes more fully so you can really take control, we offer a series of group education classes. Taught by a either a nurse or a dietitian, these classes cover carbohydrate counting, blood sugar testing, meal planning, and weight management and include a follow-up session to evaluate your progress.

Peer Support Helps
On the first Thursday of the month, people with diabetes gather at the Center to share experiences, offer emotional support, and exchange practical information related to living with various forms of the disease. There are topics for those with Type 1 and Type 2 diabetes, and all sessions are free and open to the public.

If you have Type I, Type 2, gestational diabetes, or pre-diabetes, and you want to improve your control and prevent complications, the care team at the FMH Center for Diabetes and Nutrition Services is here to help.

For more information about the resources available through the Center for Diabetes and Nutrition Services, call 240-215-1474. To learn more about how FMH is making Frederick a healthier community by helping people manage their diabetes more efficiently, visit blog.fmh.org and search Diabetes.
WHEN WOUNDS WON’T HEAL

It has been estimated that upwards of 10 million Americans annually suffer with chronic wounds, with a significant portion of that population also afflicted with chronic medical conditions like diabetes, high blood pressure, and high cholesterol. Many people in the diabetic population also suffer with a chronic condition called neuropathy, where they may lose sensation in their fingers and toes. Diabetic neuropathy, in addition to lack of circulation, can lead to complex, non-healing wounds on the feet or legs, which could lead to infection or even hospitalization.

The FMH Center for Advanced Wound Care and Hyperbaric Medicine is well versed in treating and healing patients with non-healing wounds. The typical types of wounds seen at the Center include simple to complex diabetic foot ulcers, traumatic injuries, mild to moderate burns, pressure ulcers (also known as bedsores), internal wounds from delayed radiation injury, and wounds that do not heal because of artery, vein, or lymph channel disease.

Triple board-certified in wound care, hyperbaric medicine, and family medicine, the Center’s medical director Dr. Narayan (Ryan) Kulkarni coordinates a multidisciplinary care team that includes a wide variety of specialists, including Board-certified vascular, plastic, podiatric and general surgeons, specially-trained nurses, and technologists.

The FMH Center for Advanced Wound Care and Hyperbaric Medicine team uses a wide variety of advanced diagnostic and treatment tools to promote wound healing, including advanced wound dressings, artificial skin products, negative pressure therapy, and Hyperbaric Oxygen Therapy (HBOT), a technique used to treat wounds that are not healing primarily because of poor circulation. The center is only one of two in Maryland awarded Accreditation with Distinction by the U.H.M.S., the national agency overseeing hyperbaric facilities, for achieving the highest quality and safety standards. To read more about Hyperbaric Oxygen Therapy, visit blog.fmh.org and search HBOT.

“Our approach is to focus on the whole patient while we investigate barriers to wound healing,” said Dr. Kulkarni. “It’s important that our patients understand how their wounds occurred and why they are not healing so that they can become empowered and educated. When patients understand this, they can learn how to prevent wounds in the future.”

“Patients need to realize that where they go for wound care is critically important. Not all programs are comparable. It takes an entire team of experts—not just one doctor—to bring about the healing of a complex wound. At FMH, everyone works together with a singular focus: to treat the patient’s wound and return them to full function as quickly as possible.”

– Dr. Narayan Kulkarni, Medical Director
FMH Center for Advanced Wound Care and Hyperbaric Medicine

If you’d like to learn more about the FMH Center for Advanced Wound Care and Hyperbaric Medicine, call 240-566-3480 or talk to your primary care provider.
Far left photo: Chris DeGrange weighed more than 500 pounds when he started New Direction at FMH.

Near left photo: Chris has lost more than 200 pounds since starting the program last year. He currently takes no medication at all and is even more motivated and energized to take off the 100 pounds he still wants to lose.

Although eating under stress had always been an issue for Chris DeGrange, a youthful metabolism, rigorous athletic training and a physically demanding job helped keep his weight under control.

As he got older, his metabolism slowed and he became far more sedentary. But he was still using food to offset the daily stressors of a demanding management job. Movement of any kind became painful. By the age of 40, he weighed more than 500 pounds. Constant and severe muscle cramping made even the basic activities of daily life nearly impossible.

Had he not been bitten by a brown recluse spider in 2014, Chris is convinced he would not be alive today. He was hospitalized for two weeks, because the small bite on his leg would not heal due to impaired circulation. Already diagnosed with high blood pressure and a myriad of other health concerns, Chris discovered he was diabetic and had dangerously irregular heart rhythms. His recovery took months.

Finally back on his feet again, Chris vowed to use this medical crisis as a springboard to better health. He started by making some big changes in his life to support his goals. He got a job that was a better fit for his personality and started daily short walks. Instead of having meetings inside with donuts and coffee, he began holding “walking meetings” with clients at their job sites.

“At 500 pounds, I felt completely hopeless,” said Chris. “I had no idea how to even begin to take my life back. Making the decision to contact New Direction was the first step. After that, I had everything I needed to move forward—a plan, the products and people who were knowledgeable and caring. I had to add my own desire to get well to the mix, and I did. With that combination, the pounds just started coming off.”

Chris turned to the New Direction™ program at the FMH Center for Diabetes and Nutrition Services to help him with his weight loss. With additional support from Weight Loss Navigator Tammy Norris, Chris has lost nearly 200 pounds so far.

SICK AND TIRED OF BEING SICK AND TIRED

To learn more about the weight loss programs at the FMH Center for Diabetes and Nutrition Services, contact Weight Loss Navigator Tammy Norris at 240-215-1474 or tnorris@fmh.org, or visit blog.fmh.org and search Weight Loss.
A LIFE REINVENTED

By her own admission, Sue Marshall was not the picture of health at the age of 44. At more than 100 pounds overweight, she was suffering from a variety of health conditions—sleep apnea, pre-diabetes, gall bladder issues, and fatty liver disease.

When she experienced post-surgical complications from what should have been a routine gall bladder procedure, Sue vowed to make a change. Not only would she need to shed the excess weight, she would need to learn how to keep it off, and that would mean significant changes in her lifestyle. Urged by her physician and on a friend’s recommendation, she made an appointment at the Center for Diabetes and Nutrition Services at FMH Crestwood.

With a view toward bariatric surgery, Sue began to talk to Weight Loss Navigator and Behaviorist Tammy Norris about her weight loss options. After learning that approval for the surgery required six months of eating a low calorie diet on a structured weight loss program, Sue decided to try New Direction™. She replaced all her meals with nutritionally complete products and followed the program’s suggestions faithfully. She added tennis, hiking, and dog agility training to her routine. Between mid-July and late December 2014, Sue lost 58 pounds on New Direction.

“I can’t emphasize the importance of support from others when you’re losing weight. There are other nutritional replacements out there, but no one offers the education, support and practical advice that you need to stay on track the way New Direction does. And the support I got from the FMH team was absolutely the key to my success.”

– Sue Marshall

Early in 2015, Sue transitioned to the Center’s Outlook™ program. With the help of a registered dietitian, she learned to add healthy, fresh foods into her daily diet. At less than 20 pounds from her goal weight, she has recently begun one-on-one nutritional counseling to help her continue to create healthy habits for life.

“The FMH weight loss programs taught me the difference between a failure and a setback,” said Sue. “Just because you eat a piece of cake doesn’t mean you’ve failed. Just get back to the program right away—not the following Monday, not the next day… but with the next bite you take. Little by little, you’ll get there—as long as you don’t quit.”
NEED HOME HEALTH? CARE TO COMPARE

Choosing a home health provider just got a little bit easier, thanks to a new “star rating” tool from the Center for Medicare and Medicaid Services (CMS).

According to FMH Home Health Services Director Heidi Brown, this new rating system from CMS is part of a larger effort to drive our healthcare system to be more accountable, evidence-based, and patient-centered.

“The Affordable Care Act requires that information on provider quality and safety be made available to the public in an easy-to-understand way,” said Brown. “The star rating system is one way the healthcare consumer can identify differences in quality of care and patient satisfaction among local home care services and make an informed decision based on measurable data.”

Home health providers get ratings from 1 to 5 stars, with 1 being the lowest and 5 the highest. To earn their quality star ratings, home health care providers are evaluated on their relative performance in a variety of key areas, including how often patients:

- Had services initiated in a timely manner.
- Received flu shots and education about prescribed medications.
- Got better at walking around, getting in and out of bed and up and down from a chair, and bathing themselves.
- Experienced less pain when moving around, and showed improvement in their breathing.
- Were able to recover in their homes without being readmitted to the hospital.

Patients and their families who have used the services of FMH Home Health awarded the agency the top rating of five stars for patient satisfaction, placing it above other comparable providers in Frederick County.

“We were very pleased with our four and five star ratings, especially our track record of keeping patients from returning to the hospital after discharge,” said Brown. “Because FMH Home Health Services is a part of the Frederick Regional Health System, we work collaboratively with the hospital to ensure patient care is continued after hospital discharge and patients are able to safely recover in their own homes.”

Ask an Expert – Senior Fair

Tuesday May 10, 11 A.M. - 2 P.M. • FMH Crestwood, 7211 Bank Court, Frederick, MD 21703

In recognition of Older Adults Month in May, FMH Home Health is sponsoring a FREE event for all seniors. Take advantage of the opportunity to speak with our experts on a variety of topics and attend three educational seminars. Lunch included! R.S.V.P. to Leslie Schultz at 240-566-3087 or lschultz@fmh.org.

For more information or to request services, call 240-566-3222. Medicare, Medicaid and most other insurances accepted. To read more about FMH Home Health Services, visit blog.fmh.org and search Home Health Services.
Talk to your doctor if you are concerned that you may have an increased risk for breast cancer, or call the Center for Breast Care’s Screening and Prevention Program at 301-418-6611.

For Women at Higher Risk

The FMH Center for Breast Care’s Screening and Prevention Program is a resource for women who appear to have a greater likelihood of developing breast cancer. Nurse Practitioner Patricia Rice—who is credentialed as an Advanced Practice Nurse in Genetics through the Genetic Nursing Credentialing Commission—reviews each patient’s family history to determine if testing for certain genetic markers for breast cancer (BRCA1 & BRCA2 mutations) is appropriate.

Other factors, such as age, race, breast density, alcohol and tobacco use, and whether the patient has used hormonal replacement therapies are also considered. Based on all the information available, an individualized surveillance and prevention program is created for each woman, which may include medications, nutritional counseling, and other pro-active steps to help women at increased risk for breast cancer stay healthier longer.

Guidelines for when to start and stop screening mammograms, as well as how often to have them, are based on the “average patient.” But what is the average patient? How do women know if their risk for developing breast cancer is average or higher than normal?

Because each person’s genetics, environment, and lifestyle are unique, medicine is turning from traditional “one size fits all” approaches to new strategies that take into account these unique characteristics. It’s called precision medicine, and it’s changing the way we improve health and treat disease.

A good example of precision medicine in action is a clinically validated risk calculation software program used by FMH Imaging Services. Each patient answers questions about her personal and family history on a wireless tablet. The software then uses this data to calculate the patient’s individual risk of developing breast cancer.

The results are available immediately, allowing the radiologist to read the report in real time. Women found to be at high risk are notified the same day as their mammogram and advised to follow up with their referring physician.

“The use of this breast cancer risk assessment software is just one way that we are trying to customize healthcare to individual patients,” said Dr. Pete Kremers, a radiologist with FMH Imaging Services.

The patient answers questions about her personal habits and family history on a wireless tablet at her screening mammography appointment.

The clinically validated risk calculation software program used by FMH Imaging Services converts the data entered to calculate each patient’s individual risk for developing breast cancer and makes it available to the interpreting radiologist immediately.

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Talk to your doctor if you are concerned that you may have an increased risk for breast cancer, or call the Center for Breast Care’s Screening and Prevention Program at 301-418-6611.
Superb Quality. Superb Service. All the Time. | Frederick Memorial Hospital | 400 W. Seventh Street | Frederick, Maryland 21701

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UPCOMING EVENTS: THE MORE YOU KNOW

How well we manage our health and wellness depends a lot on having the right information. That’s why FMH is offering a series of lectures, classes, and workshops on topics of interest that are free and open to the public. Walk-ins are welcome, but registrations are appreciated.

National Health Care Decisions Day:
It’s Your Life; It’s Your Plan
Saturday April 16, 2016 • 1-3 p.m.
Complete your Advance Directive at FMH’s Community Event. Local attorneys and FMH social workers will be on site to answer your questions as you make your healthcare decisions and complete your forms. For more information or to register, call 240-566-3546.

Humor and Health
Wednesday April 20, 2016 • 5:30-7:30 p.m.
Is there a link between laughter and your health? Research shows that laughter can raise pain thresholds, reduce stress, and even boost immune-system function. This program focuses on ways to use humor to manage stress, and suggests some tools to get through day-to-day life with fewer mental bruises. For more information or to register, contact Trish Reggio at 240-215-1447 or preggio@fmh.org.

Ask an Expert – Senior Fair
Tuesday May 10, 2016 • 11 a.m.-2 p.m.
In recognition of Older Adults Month, FMH Home Health Services is sponsoring a special event for seniors. Experts on topics of interest to those 55 or better will be on hand to answer questions. Workshops on chronic disease management, advanced care planning, and diabetic diet management will be held. Lunch included. R.S.V.P. to Leslie Schultz at 240-566-3087 or lschultz@fmh.org.

Osteoporosis: Are You “Fit to a T”?
Wednesday May 18, 2016 • 5:30-7:30 p.m.
Have you ever had a Bone Mineral Density Test? Do you know your T-score? A T-score tells you how weak or strong your bones are, and whether or not you are at risk for fracture. This seminar focuses on bone health, and the early detection, diagnosis, treatment and prevention of osteoporosis. For girls and women of all ages. For more information or to register, contact Trish Reggio at 240-215-1447 or preggio@fmh.org.

Events are held in the second floor conference room at The Women’s Center at FMH Crestwood, 7211 Bank Court, Frederick MD 21703. Interpreters are available by advance request by calling 240-566-4370.