Top Accreditation for the Center for Breast Care

Parkview Earns Highest Recognition

Advance Care Planning: The Time is Now

Exceptional Care Close to Home
A MESSAGE FROM THE PRESIDENT

At Frederick Regional Health System, we are proud of our long history of providing high quality care to the Frederick community. When you or someone you love is in need of care and comes to our hospital, or one of our facilities in the community, you want—and deserve—assurance that our providers and staff are well trained, our facility is clean and up-to-date, and the policies, programs and procedures we have in place support the best possible outcomes.

Earning accreditation from a third party evaluator is the best way to demonstrate our commitment to providing you with the highest quality care possible. That’s why we routinely and voluntarily invite independent agencies to review our programs and services.

After undergoing rigorous surveys, I’m proud to announce that The Center for Breast Care at FMH Crestwood and the FMH Radiation Oncology program recently achieved the highest marks possible from their respective accreditation agencies.

All of our Parkview Medical Group locations have received the highest level of recognition by the National Committee for Quality Assurance for their performance as a patient-centered medical home. Less than 10 percent of primary care offices in the country have received this honor.

I would like to personally congratulate and offer my sincere thanks to all who work tirelessly to achieve and maintain these accreditations.

I would also like to thank you, the Frederick community, our patients and visitors, as well as our staff and volunteers, for your continued confidence in Frederick Regional Health System. We will continue to work hard to be sure we are always worthy of it.

Yours in good health,

Tom Kleinhanzl, President & CEO
Frederick Regional Health System
PARKVIEW EARN TOP RECOGNITION

Parkview Medical Group recently achieved the highest level of recognition from the National Committee for Quality Assurance for its performance as a patient-centered medical home. Less than 10 percent of practices in the country have achieved this recognition, placing Parkview at the forefront of primary care delivery nationwide.

That’s a prestigious honor... but what does it mean? What exactly is a “patient-centered medical home,” and how do its features translate into better care and improved outcomes for patients?

According to Parkview’s Practice Administrator Lisa Lipton, a patient-centered medical home is a method of healthcare delivery that provides a “home base” for each patient’s medical information. A personal physician leads a multidisciplinary team to address the medical and emotional needs of patients, as well as any financial and logistical barriers to care. Care coordinators track all aspects of patients’ care, inside and outside the primary care provider’s office, to maintain the most complete picture of their health.

Medical homes focus on the key components of patient satisfaction, effective shared decision-making, and helping patients establish and work toward individual health goals. Parkview offers convenient access to care, intensive patient education and practical tools that patients living with chronic disease need to manage their illnesses.

Benefits for Patients

**TIMELY ACCESS TO CARE:** Parkview has four locations, all with evening and weekend hours. All locations offer daily appointments for sick patients who need to be seen right away. In addition, the Thomas Johnson Drive location offers walk-in appointments and the convenience of an on-site lab.

**BETTER COMMUNICATION:** Parkview has an online patient portal where patients can view health information, communicate with their care team, and request appointments when needed.

**WHOLE PERSON FOCUSED:** Physicians and care teams at Parkview recognize the need to evolve from an approach that treats a patient’s separate health issues, complaints or symptoms, to one that addresses the whole patient’s needs—medical and otherwise.

**IMPROVED CARE COORDINATION:** Sophisticated, secure Information Technology is used to track patients’ care across many elements of a complex care system that often spans multiple locations, including the hospital, home health agencies and nursing homes.

For more information or to make an appointment at any one of Parkview’s four locations, call their Scheduling Office at 240-215-6310.
HEALTHY MOM, HEALTHY BABY

Healthy Babies Are Worth the Wait
The FMH BirthPlace and the local physician community have joined forces to stop the increase in early elective deliveries. Studies show that electing to deliver babies prior to 39 weeks gestation without a medical reason—either by inducing labor, or performing a C-section—carries significant increased risk for infants. Being in the womb for as long as nature intended has important advantages—critical organs like the brain, lungs and liver have time to mature, sucking and swallowing reflexes develop more fully, and vision and hearing problems are less likely to occur.

Skin-to-Skin Contact
Skin-to-skin contact between mothers and babies immediately after birth regulates babies’ temperatures, heart rates, respirations and blood sugar levels. It also allows babies to be colonized with the same bacteria as their mothers, minimizing the risk of infection. Along with breastfeeding, this is thought to be important in the prevention of future allergies and some other chronic diseases. Skin-to-skin contact also promotes mom’s production of oxytocin—a hormone that boosts maternal feelings and a positive mood—and may play a role in decreasing the instance of postpartum depression.

All the Peas in One Pod
In The BirthPlace, moms and babies stay together during their entire stay. Known as “complete couplet care,” this approach supports breastfeeding success, and helps newborns adjust more readily to life outside the womb. New mothers are able to learn feeding, diapering, and other newborn care in the privacy of their own rooms from professional nursing staff.

Just In Case
The FMH BirthPlace welcomes nearly 3,000 infants into the world each year, and the vast majority of them—nearly 90 percent—do not need high-risk newborn care. However, in that rare instance, the highly-skilled staff of The Billy Miller Neonatal Intensive Care Unit stands ready to help. A partnership with Johns Hopkins University Hospital, this special unit is staffed by neonatologists and neonatal nurse practitioners who are employed by Johns Hopkins University Hospital, and permanently located at FMH. These highly-skilled specialists in the care of high-risk newborns are at FMH 24 hours a day, 7 days a week, every day of the year to care for infants as young as 27 weeks gestational age. Currently, accreditation is in process that will allow The Billy Miller Intensive Care Nursery to care for newborns as young as 24 weeks gestational age.

“...to the best start possible, we have focused on reducing early elective deliveries, promoting mother-child bonding through skin-to-skin contact, providing our families with complete couplet care and continuing to expand services in our neonatal intensive care unit.”

– Katherine Murray, Director Mother-Baby Services

To read more about The Billy Miller Neonatal Intensive Care Unit at FMH, visit blog.fmh.org and search NICU.

Martha and David Gurzick’s twin boys, Chandler and Alexander, were born 10 weeks early, and both were cared for in The Billy Miller Neonatal Intensive Care Unit at FMH. Visit blog.fmh.org and search NICU to read more about the Gurzicks’ experience.
WHERE KIDS ARE PRIORITY ONE

This October, the FMH Pediatric Emergency Department and Inpatient Unit marks five years of service to the Frederick community’s youngest patients. Since its opening in 2010, the Pediatric wing has served between 14,000-16,000 patients every year.

Fortunately, Frederick parents whose little ones are ill or injured don’t have to go far to find emergency care that’s geared toward the special needs of children. FMH has a 23-bed Pediatric Emergency Department staffed by an entire team of board-certified pediatric hospitalists from some of the best training programs in the country. Led by Dr. Robert Wack, these pediatric hospitalists are on site, 24 hours a day, 7 days a week, year-round to care for patients from infancy through 17 years of age. And because the traditional ER can be an intimidating place for kids, in most cases, you’ll be escorted directly to the Pediatric Emergency Department’s kid-friendly environment for assessment and evaluation.

When a child must stay overnight for treatment or observation, there is an inpatient unit—also designed and staffed especially for kids—right across the hall from the Pediatric Emergency Department. Because they are located so close together, the same team of pediatric specialists who see children in the emergency setting can continue taking care of them should they require admission to the hospital. A consistent care team ensures coordinated, quality pediatric care, and provides the soothing reassurance of familiar faces that is very comforting—especially for our pediatric patients.

According to Chief Pediatric Hospitalist Dr. Robert Wack, the hospital’s approach to comprehensive pediatric care has been very well received. “The local physician community is pleased that we offer a program staffed round-the-clock by pediatric specialists,” he says. “And nearly 99 out of a hundred past patients tell us they would recommend us to a friend.”

“That’s very rewarding,” he says. “I think it’s fair to say that this program is a win for everyone.”

“Having the Pediatric Emergency Department and Pediatric Inpatient Unit side by side makes continuity of care much easier. The same care team who works with patients who are admitted through the Pediatric ED can follow them into the inpatient setting if that becomes necessary.”

– Christie Bussard, Pediatric Nurse Manager
FMH Pediatrics

To read more about how FMH is caring for children in the Frederick community, visit blog.fmh.org and search Peds.
ACCREDITATION MAKES A DIFFERENCE

The Center for Breast Care Earns Top Marks

If you or someone you love has been diagnosed with breast cancer, you will have many options to consider and decisions to make. But there is one thing you won’t have to worry about—where to find the best possible treatment for your condition.

That’s because the best in today’s breast cancer care is available right here in Frederick at The Center for Breast Care at FMH Crestwood. Under the leadership of fellowship-trained breast surgeon Dr. Susan Bahl, The Center for Breast Care has earned a three-year accreditation from a prestigious independent review board, the National Accreditation Program for Breast Centers (NAPBC). This outstanding achievement certifies that The Center for Breast Care complies with all established treatment standards, and is committed to offering patients every advantage in their battle against breast disease.

Choosing care at an NAPBC-accredited facility like The Center for Breast Care means your care will be managed efficiently, and involve a multidisciplinary approach that includes all the breast specialists responsible for your care. It means that you will have access to comprehensive care, including a full range of state-of-the-art services and information about ongoing clinical trials and new treatment options.

And most importantly, you will receive the highest quality of care close to home.

“This is an outstanding achievement for FMH and the Center for Breast Care,” said FMH Oncology Service Line Director Carol Mastalerz. “Many centers do not achieve accreditation on the first survey. Dr. Bahl and her team achieved accreditation on their first try. This is a proud day for FMH and The Center for Breast Care.”

For more information on The Center for Breast Care, visit blog.fmh.org and search Breast Care, or call 301-418-6611.

Radiation Oncology Meets or Exceeds All Standards of Care

The FMH Radiation Oncology program has earned a three-year accreditation from the American College of Radiology (ACR). This achievement indicates that the program meets or exceeds established standards pertaining to patient care, treatment and safety, personnel qualifications, adequacy of facility equipment and quality assurance procedures.

Pictured above from L-R: Radiation Oncologist Meredith Wernick, MD; Medical Physicist Changan Xie, Ph.D.; Oncology Operations Manager Janet Rhoderick; Radiation Oncology Medical Director Gregory Gagnon, MD; Medical Physicist Dustin Simonson, Ph.D.; Oncology Service Line Director Carol Mastalerz and Radiation Therapist Wendy Lewis, RTT.

For more information on FMH Radiation Oncology, visit fmh.org/radiation.
At The Center for Breast Care at FMH Crestwood, all the services that patients with breast cancer or benign breast disease need are located in one convenient facility. Initially, each patient is seen in one visit by a breast surgeon, a medical oncologist, and a radiation oncologist. Going forward, the approach to care is multidisciplinary, and includes physicians, nurses, social workers, dietitians, therapists and other support services who meet regularly to discuss treatment options and other aspects of a patient’s care. A nurse navigator works directly with the patient’s care team to facilitate communication, help overcome any barriers to treatment, and provide timely access to medical and supportive care.

Last January, Renee felt a lump in her breast while applying lotion. Wasting no time, she went to see her primary care doctor, who sent her immediately to The Center for Breast Care at FMH Crestwood for additional screening.

Renee’s screenings began with an Ultrasound and a 3D Mammogram. During a 3D mammogram, an x-ray arm sweeps over the breast in a slight arch, capturing multiple images of the breast tissue in one-millimeter “slices.” These views make fine details of the images more visible, allowing radiologists to evaluate breast tissue more accurately than ever before.

Both of Renee’s screenings showed abnormalities. Two days later, she underwent an ultrasound biopsy of the lump. When the biopsy results came back, Renee learned that she had breast cancer.

The next day, Renee and her husband met with her entire team of providers at The Center for Breast Care to map out her treatment course. To ensure that nothing was missed, Renee had an MRI to examine her overall breast health—standard practice for anyone with a new breast cancer diagnosis.

Once the doctors had an overall picture of Renee’s health and diagnosis, she underwent a lumpectomy to remove the malignant tumor, and then began chemotherapy treatments. Following chemotherapy, Renee had 30 sessions of radiation treatment over a span of six weeks to remove any remaining cancerous cells. All of Renee’s appointments were organized and scheduled by her nurse navigator at The Center for Breast Care.

Exactly one year ago, Renee received her last radiation treatment. Today, she is cancer-free, and extremely grateful for the care she received at The Center for Breast Care, and the support of her family and friends.

“My experience at The Breast Center was great,” she said. “I could tell they were concerned and wanted to help. I was very impressed with how they took care of everything, and figured out the exact treatments I needed. Having a nurse navigator was phenomenal. She took a very overwhelming experience and made it much easier. And with all the new treatments and technologies, I learned that breast cancer is not a death sentence. You will live to see another day.”
Since 1991, FMH has been recognizing local citizens who have demonstrated extraordinary commitment to the Frederick community with its Good Samaritan of the Year Award. The highest honor given by FMH to an individual, this Award is shared by a group of men and women whose lives epitomize excellence, leadership and generosity—both toward FMH, and the community at large.

Last May, members of the Order and their guests gathered to celebrate the 25th Anniversary of the Good Samaritan of the Year Award, pictured above. Past recipients joined this year’s honorees and FMH President and CEO Tom Kleinhanzl on stage.

2015 Recipients

Family Practice physician Julio Menocal was recognized for his commitment to providing health care to Frederick’s underserved population. Located on the Golden Mile, Menocal Family Practice has evolved into a local community center, sponsoring events to connect neighborhood residents with police, emergency services and city and county personnel. He has worked steadily to break down barriers that often prevent disadvantaged families from receiving care, and mentored dozens of medical students, helping to create the talented and socially conscious physicians of tomorrow.

A member of the Frederick County Bar for more than 75 years and a former Maryland State Delegate, W. Jerome “Jerry” Offutt’s professional career has been rich and distinguished. Over the past seven decades, Mr. Offutt has served in numerous volunteer leadership positions throughout the Frederick community. In 1986, he co-founded the Community Foundation of Frederick County with colleagues Donald C. Linton and the late Charles V. Main. Today, the Community Foundation has more than 660 different funds whose proceeds benefit hundreds of local residents and organizations, including FMH.
The FMH cancer care program is a highly-regarded center of excellence. Our physicians have a wealth of experience and expertise in medical, radiation and surgical oncology. Our oncology certified nurses, navigators, social workers, technicians, and other professionals provide compassionate care, emotional support, and complementary services. The care team works together with one goal: to assure that each patient has the benefit of an entire team of cancer experts, all focused on treating the body, mind, and spirit.

Plans to build a new facility to support the hospital’s award-winning cancer care program are well underway. Located on the hospital’s Rose Hill campus, this much-needed facility will allow FMH to build on its history of providing high quality, patient-centered cancer care in an environment that is convenient, comforting and healing. An expanded Multidisciplinary Clinic will provide more space for treatment planning and clinical coordination among our care teams, and allow newly diagnosed patients to meet with everyone involved in their care. A larger Infusion Center will offer patients undergoing chemotherapy more privacy and choices for their comfort. In addition, the new floor plan provides for expanded medical, radiation, and surgical oncology clinics, and room to house educational and support groups, alternative and complementary therapies, and an expanded clinical trials program. Imaging and lab, as well as other ancillary services, will also be offered on-site, enhancing our ability to offer convenient access for our community, closest to where our patients live.

Several years ago, the FMH Development Council committed to raise $15 million of the estimated $20 million needed to build and equip this facility. Thanks to the hard work and dedication of these volunteers, and the generosity of the Frederick community, $10.7 of that $15 million goal has been raised through The Time is Now Campaign.

There is still a ways to go, but with your support we will make this project a reality for cancer patients and their families in our community. For more information or to make a contribution, please visit fmh.org/cancer or call 240-566-3478.

"Just as we have supported prior life-saving and life-sustaining initiatives at FMH such as LifeNet and CyberKnife, we at Delaplaine Foundation recognize the vital importance of the FMH Cancer Institute in providing advanced, comprehensive care for cancer patients—not just for the immediate community, but in anticipation of this being a leading cancer institute of the Mid-Atlantic region. In its mission to enrich families and communities, Delaplaine Foundation is proud to support the FMH Cancer Institute."

– Marlene Young, President Delaplaine Foundation, Inc.
THE TIME IS NOW

Jackie Dinterman was a social worker on the FMH Intensive Care Unit for more than 10 years. During that time, she watched many families grapple with heart-wrenching decisions regarding the care and treatment of loved ones who could no longer speak for themselves. Faced with their loved one’s progression of a chronic illness, complications resulting from surgery, or an acute event such as a stroke, families were exhausted, stressed, and confused. They often disagreed with one another about “what mom would want,” sometimes doing what Dinterman could only assume was irreparable damage to their relationships with one another.

Helping families avoid this stressful situation is one of the reasons that Dinterman is passionate about Frederick Memorial Hospital’s Advance Care Planning initiative.

“Advance Care Planning (ACP) is the process of reflecting on, discussing, and planning for a time when a person can no longer make his or her own medical decisions,” she explains. “The ACP initiative is based on partnerships both inside and outside the hospital designed to raise awareness, provide education and inspire people of all ages and stages of wellness to plan for these types of issues before there’s a crisis, when they can think and express themselves more clearly.”

One of the key components of the Advance Care Planning initiative is The Conversation Project, a national campaign designed to encourage people to talk with one another about how they want to live during the last phase of their lives. To support and encourage as many people as possible to have “the conversation,” FMH is working closely with a wide variety of community-based organizations to spread the word, including primary care practices, assisted living facilities and nursing homes. Lay health educators affiliated with the FMH Bridges program are working within Frederick’s faith-based communities, and members of the Advance Care Planning committee are holding workshops and discussions for the community at large to stress the importance of the topic. In addition, the hospital has created a Patient and Family Advisory Council (PFAC) to keep the patients and their families at the center of this initiative.

“Remember, Advance Care Planning is not an end-of-life plan,” says PFAC member Nikki Moberly. “We call it a ‘plan for living,’ because it’s about making sure that people live out their last days according to their wishes. And one conversation can make all the difference.”

For ideas and tips about how to get a conversation like this started in your own family, or to download a starter kit on this topic for your personal use, visit theconversationproject.org.
BRIDGING THE GAP

Seventy-four-year old Mary Brandenburg of Adamstown has COPD, a progressive lung disease characterized by breathlessness, wheezing, and a chronic cough. She is also a diabetic. Both diseases are difficult to manage separately, but in combination, they can present even more of a challenge.

In March, Mary was admitted to Frederick Memorial Hospital with difficulty breathing. Previously controlled symptoms of her diabetes reappeared, causing her to feel nauseated and weak. After five days in the Intensive Care Unit, she was finally able to breathe normally on oxygen, and the symptoms of her diabetes had subsided. Still, her energy and stamina had been greatly compromised, and it was apparent that Mary would need continuing care to avoid re-hospitalization and get back on her feet.

Keeping Mary’s recovery on track took good communication among everyone involved in her care across a variety of settings. Prior to discharge from FMH, a social worker from the hospital’s Care Transitions team visited her and discussed her transfer to the Skilled Nursing Facility for rehab. Then, the FMH social worker reached out to Mary’s new care team at the skilled nursing facility to review her history with them, including medications she was taking, her past treatment plan, and any goals she had been working toward in Physical and Occupational Therapy while in the hospital.

After five weeks in rehab, Mary was strong enough to go home—but help was still needed. She chose FMH Home Health Services for the last phase of her recovery. A nurse visited several times per week to make sure Mary’s health was on track. Occupational therapists showed her new ways to manage daily activities, and a physical therapist worked with her on strength, mobility and balance. Education about food choices, exercise, and other lifestyle choices was also an important part of Mary’s home health care.

During her care, a team of providers across three different settings worked together to coordinate Mary’s care. As a result, Mary has made some important lifestyle changes, and is feeling better than she has in a long time.

“As part of the Frederick Regional Health System, FMH Home Health Services is closely aligned with the hospital’s goals for patients—especially those who have begun their treatment there,” says Director Heidi Brown. “With access to everything related to a patient’s care and treatment, we are the next step on their continuum of care.”

Wondering if you or someone you know would qualify for FMH Home Health Services? Talk to your doctor, or call us at 240-566-3222. A staff member will work with you to determine eligibility for service, verify insurance benefits and coverage, help determine any financial obligations, and work with you to obtain a doctor’s order.
Superb Quality. Superb Service. All the Time. | Frederick Memorial Hospital | 400 W. Seventh Street | Frederick, Maryland 21701

This Fall FMH Women’s Health Services is offering four informative seminars on topics of special interest to women. Each seminar will be conducted by a recognized expert in the field and include an opportunity to ask questions. Light refreshments will be provided. Free and open to the public.

I Only Leak When I Laugh: A Seminar on Women’s Pelvic Health Concerns
Wednesday, September 16, 2015, 5:30-7:30 P.M.

Do you leak when you laugh or cough? Do you feel pressure and discomfort after a long day of standing on your feet? Do you look for bathrooms everywhere you go, and worry that you may not get there in time? If you answered yes to any of these questions, you are not alone. There is help available.

How Sweet It Is: Diabetes Prevention and Treatment
Wednesday, November 18, 2015, 5:30-7:30 P.M.

More than 29 million people in the U.S. have diabetes, and millions more remain undiagnosed. This seminar will look at the effects of this disease and the importance of prevention. A discussion of lifestyle interventions and a cooking demonstration will highlight this interactive event.

We Don’t Rest Until You Do: Women, Snoring, and Sleep Disorders
Tuesday, September 29, 2015, 5:30-7:30 P.M.

Do you experience excessive daytime sleepiness or chronic fatigue, morning headaches, dry mouth, or difficulty concentrating? Do you snore, have impaired memory, or fall asleep while driving? You may have what is known as obstructive sleep apnea, a serious sleep disorder that occurs when a person has repeated interruptions in their breathing during sleep.

Surviving the Holidays
Tuesday, December 8, 2105, 5:30-7:30 P.M.

This seminar focuses on practical ways to take care of one’s self mentally and physically during this stressful season of the year. Topics and demonstrations will include mental relaxation techniques, seated yoga demonstration, and a humorous yet educational cooking demonstration with a local culinary instructor.

All seminars will be held in the second floor conference room at The Women’s Center at FMH Crestwood, 7211 Bank Court, Frederick, MD 21703. Walk-ins are welcome, but pre-registration is appreciated by calling Trish Reggio at 240-215-1447 or emailing preggio@fmh.org. Interpreters are available by advance request by calling 240-566-4370.