

MARYLAND'S

HEALTH MATTERS

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UNIVERSITY of MARYLAND
CAPITAL REGION HEALTH

New mom relaxing with her baby in the private Healing Garden on the Women's and Infants floor.



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ON THE COVER

BRIDGING WOMEN'S HEALTH CARE GAPS

University of Maryland Capital Region Health aims to provide safe and comprehensive care to the women of Prince George's County.



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UNIVERSITY of MARYLAND CAPITAL REGION HEALTH

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WE WOULD LIKE TO HEAR FROM YOU

Please send us your comments, information requests or change of address to: **Jania.Matthews@umm.edu** or **Bobbi.Phillips@umm.edu**

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SERVICE EXCELLENCE: A TOP PRIORITY

SINCE OPENING the University of Maryland Capital Region Medical Center in June, we are well on our way to changeUP health care in Prince George's County and the surrounding area. As we continue our efforts to transform health care, several initiatives have been implemented to address the increase in volumes through process enhancements, staffing, technology and a focus on service excellence. I want to remind members of the community about our commitment to deliver on the promise to provide safe, quality and compassionate care. If we are not fulfilling that promise, we want to hear from you.

We have an unwavering devotion to this journey in striving for excellence and becoming the provider of choice in Prince George's County. Thank you for entrusting our caregivers with your health. Our team members are here to serve and ensure you receive the best possible experience.

Nathaniel Richardson Jr.

Nat Richardson, Jr.
President and CEO

Thank you for entrusting the University of Maryland Capital Region Health Team with your care.



Nat Richardson Jr.
President and CEO

As part of our organization's mission, we promise to provide compassionate care with dignity and respect. That means that you should receive excellent care and communication from your caregiver.

Please give us a call if we have not fulfilled our promise. Either I or another member of my executive team can be reached at 240-677-1088.



Thank you for letting us take care of you.



PHILANTHROPY IN PRINCE GEORGE'S COUNTY: THE WOMEN'S GIVING CIRCLE

TOO OFTEN WE think philanthropy is reserved for the wealthy. Thankfully that perception could not be further from the truth, and we now know anyone can be a philanthropist. A giving circle provides this opportunity by bringing like-minded people together to provide focused strategic support to organizations and programs.

The Women's Giving Circle (WGC) is comprised of women who are passionate about health care and improving health outcomes for residents in Prince George's County through collective philanthropy. Our mission is to inspire and empower women to fulfill their philanthropic potential by improving the quality of health care for them and their families. Members support existing and future initiatives within University of Maryland Capital Region Health for women of all ages.

The first initiative of the WGC, "1000 for \$1000" campaign, aims to raise \$1 million for Women's Health and Specialty Services at UM Capital Region Medical Center

located in Largo, MD. Inspired by UM Capital's own Gita Shah, MD, the WGC plans to fund programs and initiatives that will have sustainability and a lasting community impact. Supporters can also take advantage of an exclusive recognition opportunity in the Women's Health Unit.

Joining the WGC provides an opportunity to lead, build, inspire, advocate and educate through collective giving. Together, we can thoughtfully and proactively drive change—and make a real, practical difference. By becoming a member, you uplift an entire community of women.



For more information on Women's Giving Circle, visit bit.ly/infowgc or contact Tiffini Gillespie at **240-456-2934** or tiffini.gillespie@umm.edu.

SAFETY FIRST



FOR RESEARCHERS WHO DEVELOP NEW VACCINES, KEEPING PEOPLE SAFE IS THE TOP PRIORITY.

WITH COVID-19 VACCINES now widely available after receiving Emergency Use Authorization (EUA) from the FDA, many people have questions about how vaccines are developed, why some take much longer than others to develop and how we know they are safe.

“When it comes to the process of vaccine development, the most important thing is safety,” said Kirsten Lyke, MD, professor of medicine at the Center for Vaccine Development and Global Health at the University of Maryland School of Medicine (UMSOM). “The standards are rigorous.”



THE BASICS OF VACCINE DEVELOPMENT

The first step is laboratory research. Scientists study the infectious organism to determine how it causes illness, and they perform initial tests to see if the vaccine has potential.

“With malaria, we do a lot of field studies and look at people’s immune response—then we see if we can replicate that response using a vaccine,” said Dr. Lyke, who is leading studies on vaccines for tropical diseases and was one of the principal investigators on the first Pfizer COVID-19 vaccine trial in the U.S., conducted by UMSOM.

As studies move into the pre-clinical phase, researchers test the vaccine on animals, often mice or rabbits, to gather information about how it works and whether it has negative effects. If the vaccine is deemed ready for human testing, the data is compiled and submitted to the FDA, which must grant approval before human trials begin.

TESTING IN PEOPLE

Human trials are generally done in three phases:

Phase one: Usually 20 to 100 healthy volunteers receive the vaccine, and researchers study whether increasing doses creates side effects. The focus is on safety.

Phase two: Hundreds of people with varying backgrounds and health statuses receive either the vaccine or a placebo. Researchers compare results from these groups, looking for side effects and the potential efficacy of the vaccine.

Phase three: The group of people in the study increases to thousands to give researchers a better picture of efficacy and side effects deemed less common.

Based on the results of these trials, changes will be made or the vaccine goes to the FDA for full approval.

SPEEDING UP DURING THE PANDEMIC

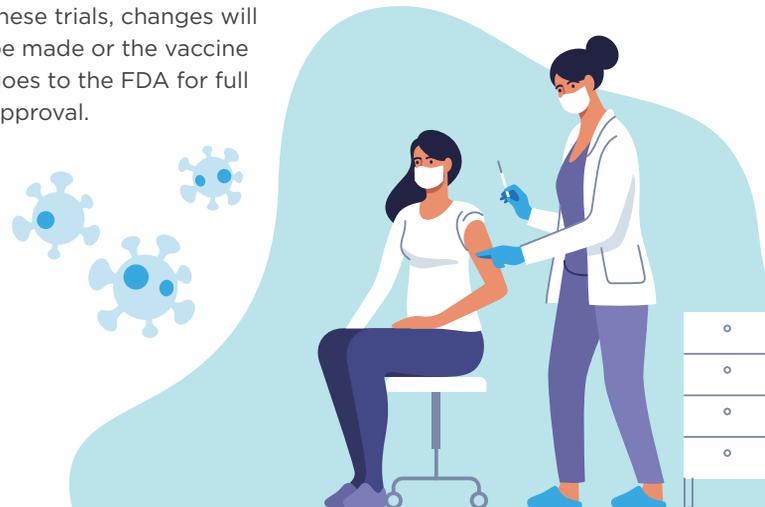
“To the public, it might seem like COVID-19 vaccine development is moving very quickly, but vaccines are typically developed based on previous research,” Dr. Lyke said.

To respond to COVID-19, Pfizer and Moderna used a type of vaccine, called mRNA, that has been studied and tested for decades. In addition, the approval process was expedited by applying for EUA from the FDA.

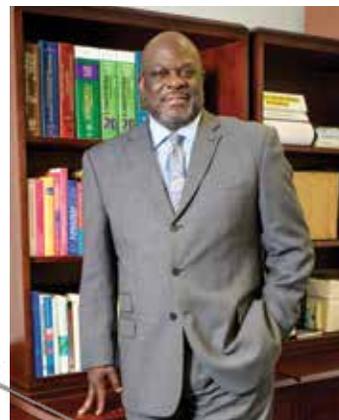
“When everyone focuses on one common goal, things can move very quickly,” Dr. Lyke said.



Is everyone in your family current on flu and other vaccines? Visit umcapitalregion.org/primarycare to locate a primary care provider near you.



Vaccine Development and Diversity:



Q&A WITH DR. WRIGHT

JOSEPH WRIGHT, MD, MPH, FAAP, SENIOR VICE PRESIDENT AND CHIEF MEDICAL OFFICER OF UNIVERSITY OF MARYLAND CAPITAL REGION HEALTH, ANSWERS QUESTIONS ABOUT THE COVID-19 VACCINE AND COMMUNITIES OF COLOR.

Q: WHY ARE CLINICAL TRIALS IMPORTANT?

A: Clinical trials help us make advancements in modern medicine. Diverse populations are necessary for us to fully understand how new medications affect our communities. The area we serve is particularly diverse, and as an academic health system, we're excited about our opportunity to help communities of color get involved in clinical trials. It's a form of population health; it lets us care for our community.

Q: HAVE MEDICAL COMMUNITIES CAUSED HARM TO COMMUNITIES OF COLOR IN THE PAST?

A: Unfortunately, there are examples of this within our country's history. Some cases, such as the Tuskegee experiment, are less than a century old. The cause for skepticism within our communities is understandable. I'm sympathetic toward those with concerns, but one thing I've learned in the past few months since we started vaccinating is the power of information. Learning how the COVID-19 vaccine was developed instills confidence in people.

Q: WHAT'S IMPORTANT FOR PEOPLE OF COLOR TO KNOW ABOUT HOW VACCINES FOR COVID-19 WERE DEVELOPED?

A: Compared to past clinical trials, the COVID-19 clinical trial included a significant number of people of color as participants. Nationally, nearly 10% of the participants in the phase III Pfizer vaccine trial were African American and 20% Latino. The University of Maryland School of Medicine,

academic partner of UM Capital Region Health, was proud to be an enrollment site for the clinical trial and successfully recruited many Prince George's County residents to participate. These numbers are monumental; they helped us understand the effects of the vaccine on communities of color, ensuring it is safe for us.

Q: WEREN'T THE CLINICAL TRIALS FOR THE COVID-19 VACCINE RUSHED?

A: No; in fact, the technology used to develop the vaccine has been in the works for several years. We were also able to identify the virus' genetic footprint in December 2019, which allowed us to start clinical trials almost immediately.

Q: WHAT IF SOMEONE REMAINS SKEPTICAL ABOUT RECEIVING THE VACCINE?

A: Education about the safety and efficacy of clinical trials, including those used to develop the COVID-19 vaccine, has given numerous people the confidence to get vaccinated. For those who are still uncertain, start a discussion. Open conversations help us learn new information, alleviate concerns and build trust in our communities.



Questions about COVID-19? Call the Nurse Call Line at **1-888-713-0711**.



Hilarine Numbusi (right) with baby Kamala on the Mama and Baby Mobile Health Unit for her first postpartum exam with CNM Monique Stevens.

Bridging Women's Health Care Gaps **IN PRINCE GEORGE'S COUNTY**

UNIVERSITY
OF MARYLAND
CAPITAL REGION
HEALTH IS LEADING
THE WAY IN
MEETING WOMEN'S
HEALTH NEEDS
AND IN CREATING
A CENTER OF
EXCELLENCE TO
SERVE ALL.

FROM ITS INCEPTION, the newly opened University of Maryland Capital Region Medical Center has had an unwavering commitment to addressing the community's health disparities in each of its departments. In combination with unmet social needs, such as financial difficulties or lack of transportation, Prince George's County residents have faced the brunt of disease in the state of Maryland. The care teams at the new medical center decided to be a part of the solution, starting with women's health.

"Women drive the health care of their families," said Stacey Little, PhD, MPH, MSW, vice president of Women's and Infants' Services and Community and Population Health. "They take their children to the doctor. They encourage their husbands to seek care. If we foster a community of women focused on health and wellness, it will be contagious and pass along to the entire family."

Little is a co-chair of Prince George's Healthcare Action Coalition, and she strategizes with other local organizations on how to improve health and wellness in the community. Whether it's through excellent services provided at the hospital or via traveling mobile clinics, UM Capital Region Health is utilizing every resource to promote greater health equity in the county.

"We have a commitment to women in this community," Little said. "Regardless of their economic situation, country of origin, language needs and history of health care access, it's our motivation to provide quality, safe and comprehensive medical care to all."



Before giving birth, Nancy Rojas is examined by CNM Billie Hamilton-Powell.

“UM Capital Region Health uses the term ‘ESL’ as ‘Equity as a Second Language.’ We want fairness to be our primary providers’ second language across all our services.”

—BRIANA WALTON, MD,
DIRECTOR OF FEMALE PELVIC
MEDICINE AT UM CAPITAL
REGION HEALTH

CENTRALIZED LOCATION TO ADDRESS INTIMATE HEALTH ISSUES

Urogynecologists treat women with complex pelvic conditions, including incontinence, recurrent urinary tract infections and pelvic organ prolapse. Briana Walton, MD, a practicing urogynecologist of more than 20 years, was chosen as director of Female Pelvic Medicine to build this comprehensive specialty permanently under the roof of UM Capital Region Medical Center.

“Women should be able to connect with an established provider for help managing these intimate health issues,” Dr. Walton said. “Our program will have the full range of providers, including gynecologists, urologists, colorectal surgeons and eventually pelvic floor physical therapists and other advanced specialists.”

Offering long initial appointments—approximately an hour—with patients, she prioritizes communication and aims to understand her patients and better tailor treatment.

“We look at patients’ individual background to see how it may impact their condition,” Dr. Walton said. “But it’s equally as important to learn about their lifestyle. Is the patient a single mom? Does she work a job that requires heavy lifting? As providers, we must listen and understand the women sitting in front of us if we want to improve health outcomes.”

TREATING COMPLEX DISORDERS WITH MINIMALLY INVASIVE SURGERY

Dr. Walton will join O. Lawrence Stitt III, MD, FACOG, director of Minimally Invasive Gynecologic Surgery at UM Capital Region Health, to create and lead a robotic surgical team for the new facility. In the area of women’s health, robotic surgery has been seen as an unprecedented technological advance that has changed the way we perform surgery. Surgeons control the instruments remotely and use three-dimensional images to perform complex procedures. The robotic system provides dexterity, allowing surgeons to treat conditions such as fibroids, ovarian cysts and endometriosis. Patients may even go home the same day of the procedure.

Dr. Stitt is proud to offer this innovative approach to the women of Prince George’s County who historically have had to travel outside their community to have these procedures performed. Women and their families no longer have to travel long distances or take additional time off from work, and families have the ability to provide supportive care during the immediate recovery period in their own community.

“We detect fibroids in up to 70% of Caucasian women and up to 80% of African American women by age 50,” Dr. Stitt said. This very common pelvic disorder can cause missed days from work, the inability to participate in family activities and an overall decreased quality of life. In some patients, change of lifestyle or medication can treat the disorder, but for others, the only cure is surgery. “Today with the new facility, we have the opportunity to mitigate the lack of access to experts who use advanced technologies to treat disorders of the female pelvis. With the launch of this program, women of Prince George’s County will have the options they deserve.”

DEDICATED CARDIO-OB PROGRAM

Increasing rates of high-risk pregnancies spurred the development of the Cardio-OB program, which was built to detect and address cardiovascular disease that develops during pregnancy.

“We identified from data at University of Maryland Prince George’s Hospital Center that about 50% of patients have one high risk factor that affects pregnancy,” said Kerry Lewis, MD, FACOG, board certified maternal-fetal medicine specialist and system director of the women’s health service line at UM Capital Region Health. “Of those high-risk patients, 25% have hypertension disease, whether chronic high blood pressure or preeclampsia.”

Led by Dr. Lewis in maternal-fetal medicine and Sheila Woodhouse, MD, MBA, FACC, medical director of Cardiology, practicing in National Harbor and co-lead of Cardio-Obstetrics at UM Capital Region Health, the team identifies women who have cardiac diagnosis or risk factors, such as

“To provide proper access to health care, we must be innovative, optimize quality, understand the community we serve and be able to implement the plan to improve outcomes by using technology and data. Cardio-Obstetrics is one way to change the paradigm and reduce the mortality rates for women in Prince George’s County.”

—SHEILA WOODHOUSE, MD, MBA, FACC, MEDICAL DIRECTOR OF CARDIOLOGY, AMBULATORY, AND CO-LEAD OF CARDIO-OBSTETRICS AT UM CAPITAL REGION HEALTH



Maternal-Fetal Medicine specialist Dr. Kerry Lewis with new mom Taylor Clark and baby Egypt.

hypertension during pregnancy and within the first year post-partum and enrolls them in this team-based program. The women are monitored, treated and placed under the care of Dr. Woodhouse throughout their life to mitigate future cardiovascular risk and diagnosis. Patients also receive valuable education on diet, lifestyle and non-medical strategies to reduce the risk of heart disease.

“Cardio-Obstetrics is a relatively new practice area and one of the most important medical practices that women need to know exist,” Dr. Woodhouse said. “I have provided cardio obstetric care for the past 16 years, before it was even coined Cardio-Obstetrics. Now, it is front and center on the national stage as the American College of Cardiology

begins to formalize and understand cardio obstetrics to establish future guidelines and direction for the care of women.”

COMPREHENSIVE BREAST HEALTH TEAM

Katerina Tsiapali, MD, FACS, was named the director of Breast Health for UM Capital Region Health. A fellowship-trained breast surgeon, Dr. Tsiapali will head a team to work with cancer patients and women with breast problems. The more comprehensive program will include medical oncology, radiation oncology, genetics services, physical therapy and rehabilitation services.

“We have two main goals,” Dr. Tsiapali said. “We want to create a friendly, comfortable environment that facilitates cancer patients’ multiple appointments and complicated schedules. We also want to make sure we meet women in the community where they are.”

Dr. Tsiapali has noted that many women in the area have a harmful combination of risk factors. African Americans 1) have a more aggressive cancer biology, 2) are not getting routine screenings, and 3) are not receiving comprehensive care. By having a dedicated breast health team, these women can find specialized care right in their hometown.

BIRTH THE WAY YOU WANT

With more women choosing to have fewer children and/or have them later in life, the experience should be safe, thoughtful and memorable. The new Labor & Delivery unit is supported by nine nurse midwives to give women the birthing experience they deserve. If patients meet certain criteria, they can choose to have a holistic

birth experience with less medical intervention. Each birthing room is spacious with large showers and windows that let in plenty of sunshine. There is a dedicated room for a water birthing experience with special monitors that can go in and out of water. The birthing unit provides a home-like atmosphere while still having the necessary staff nearby to help in case of an emergency during labor.

“We focus on giving each family what they want,” said Billie Hamilton-Powell, certified nurse midwife and director of Midwifery Services and Mobile Health. “This means we are becoming a more breast-friendly unit, encouraging delayed cord clamping, and allowing for skin-to-skin bonding during a baby’s first hour of life.”

MAKING A DIFFERENCE

The disparities for women in Prince George’s County have long been an issue and will not be solved overnight. But UM Capital Region Health is committed to shining a light on this challenge and breaking down barriers to access to health care facilities and trained physicians for all women in the community.

By identifying underlying conditions, offering innovative treatments and establishing access to vital care through specialists the community needs, UM Capital Region Health works tirelessly to not just provide services, but to make a difference.



For more information about each service, visit umcapitalregion.org/womenshealth.



The bus offers free services Mondays, Wednesdays and Fridays and occasional Saturdays. Interpreter services are available in more than 100 languages.

To make an appointment with the Mama Baby Bus, call **301-437-5788**.

MEETING THE HEALTH CARE NEEDS

of Prince George's County Women WHERE THEY LIVE AND WORK

EVERY WOMAN HAS health care needs, but not every woman has the means to address them. Sometimes it's a lack of transportation. Other times it's a lack of insurance. And for some, it is a language barrier or just not knowing where to turn. That's where University of Maryland Capital Region Health's Mother and Baby Mobile Health Unit—the 'Mama Baby Bus'—comes in.

The Mama Baby Bus is a partnership between the March of Dimes and UM Capital Region Health. It delivers community-based care to women and children of Prince George's County and the District of Columbia.

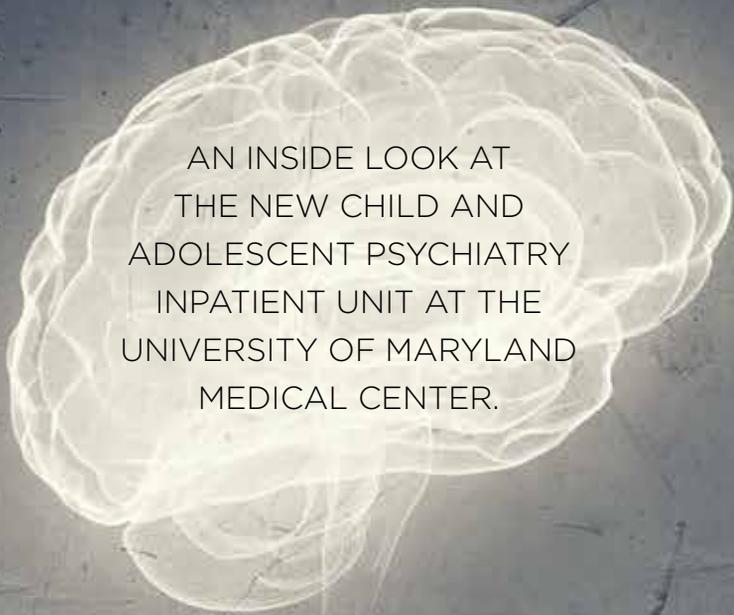
"We were seeing women with serious conditions that could have been prevented," Billie Hamilton-Powell, certified nurse midwife and director of Midwifery Services and Mobile Health said. "We thought, 'If only they had received prenatal care, maybe we could have helped the mother and baby.' Now, regardless of income level or insurance, women are being taken care of on our bus."

The Mama Baby Bus provides regular gynecologic care, pap tests and breast exams as well as maternity care right in their backyard.

Hilarine Numbusi went to the Emergency Department at University of Maryland Prince George's Hospital Center because she was experiencing unusual spotting and bleeding. The ED confirmed that she was 8 weeks pregnant and referred her to the UM Capital Region Health Mama Baby Bus for follow-up care.

"I really didn't know what I was going to do," Numbusi said. "I don't have insurance, and I had had a miscarriage before, but from the very start, my experience with the Mama Baby Bus was really great. Everyone was very caring, very nice. They scheduled my monthly appointments, prescribed prenatal vitamins and scheduled my sonograms. It was all just really great."

Monique Stevens, CNM, cared for Numbusi throughout her pregnancy and was with Numbusi at UM Capital Region Medical Center the day they opened to deliver her baby. "She is one of our great success stories. Having a baby without insurance can be scary, especially if they are not able to afford prenatal care. That's what our Mobile unit is used for. We are the bridge that connects these low socioeconomic disparities or uninsured women to healthier mother-baby outcomes."



AN INSIDE LOOK AT
THE NEW CHILD AND
ADOLESCENT PSYCHIATRY
INPATIENT UNIT AT THE
UNIVERSITY OF MARYLAND
MEDICAL CENTER.



Hope & Healing
FOR YOUNG
MINDS



MENTAL HEALTH CONDITIONS affect about 1 in every 5 children. Of these, fewer than 20% will receive treatment. Left untreated, these conditions can cause future problems.

To provide care to more young people, the University of Maryland Medical Center (UMMC)—the flagship hospital of the University of Maryland Medical System—opened its new Child and Adolescent Psychiatry Inpatient Unit. The new unit, which opened on June 30, 2021, provides compassionate, quality psychiatry services across the University of Maryland Medical System and beyond.

“This new unit communicates a sense of hope to the youth we serve,” said Sarah Edwards, DO, assistant professor of psychiatry and director of the Division of Child and Adolescent Psychiatry at the University of Maryland School of Medicine. “It offers a warm and welcoming environment that helps promote health and healing. It tells adolescents that we respect them. It assures them that their mental health is as important as their physical health.”

A CLOSER LOOK

Inside the 14-room, 16-bed unit, children and adolescents ages 5 to 17 have a unique opportunity to begin the healing process. Nature themes and imagery provide a calming environment. Lighting mirrors young people’s natural circadian rhythm to help them sleep well and wake with energy for the day. In-room music control and dry erase boards give patients control over their environment. Large windows provide a visual link to nature to promote well-being.

With so much in the unit, one thing is noticeably absent.

“The choice to have no nursing station inside the unit was very intentional,” said Jill RachBeisel, MD, chair of the Department of Psychiatry at the University of Maryland School of Medicine. “It helps us maximize interaction with our patients.”

With this setup, providers give all their focus to patients while in the unit. Paperwork, phone calls and treatment planning take place elsewhere—off-stage. It seems a small thing, but it has big implications. It builds trust between patients and providers, an essential aspect for successful treatment.



KNOWING THE NEED

The Child and Adolescent Psychiatry Inpatient Unit at the University of Maryland Medical Center provides care for a full array of psychiatric services. The most common conditions treated include:

- Aggression
- Anxiety disorders, such as phobias, panic disorder and social anxiety disorder
- Attention-deficient/hyperactivity disorder (ADHD)
- Co-morbid neurodevelopmental disorders, such as mild intellectual disability and high-functioning autism spectrum disorder
- Mood disorders, such as depression and bipolar disorder
- Psychotic spectrum disorders, such as schizophrenia and substance-induced psychotic disorders
- Trauma disorders, such as post-traumatic stress disorder (PTSD) and adjustment disorder

KEEPING TRAUMA FRONT OF MIND

Whether due to sexual abuse or domestic terrorism, trauma can have lasting impact on behavior and thinking. The Substance Abuse and Mental Health Services Administration reports that more than 2 of 3 American children experience at least one traumatic event by age 16. That’s why UMMC uses a trauma-informed framework for child and adolescent psychiatric care.

“A youth’s brain development is affected by adverse childhood events,” Dr. Edwards said. “These traumatic events affect a child’s ability to manage emotions and succeed in their homes and communities. Our goal is to help children and teens strengthen their coping skills and build resiliency.”

The trauma-informed model of care used at UMMC is called ARC—for Attachment, Self-Regulation and Competency. The ARC framework first recognizes that many people suffer trauma, then it aims to create an atmosphere in which everyone feels safe, supported and empowered.

“Behavior is always communicating something,” Dr. Edwards said. “ARC calls on us to ask why a child might be acting this way and what does a child need right now. It’s a fantastic tool that helps us serve young patients.”

ARC provides structure and supports patience and understanding.

At the Child and Adolescent Psychiatry Inpatient Unit, teamwork is crucial because psychiatrists aren’t the only experts working with young patients. The team also includes psychologists, nurses, nurse practitioners and social workers, as well as occupational therapists, child life specialists, behavioral health associates and psychiatry technicians. All use ARC because it has been shown to be effective at moving kids toward improved mental health. It helps them leave the unit and get back to life.



“Children’s mental health matters, and there is effective treatment available. That’s why we’re here—to make a difference in kids’ lives and help them move toward a brighter future.”

—SARAH EDWARDS, DO, ASSISTANT PROFESSOR OF PSYCHIATRY AND DIRECTOR OF THE DIVISION OF CHILD AND ADOLESCENT PSYCHIATRY AT THE UNIVERSITY OF MARYLAND SCHOOL OF MEDICINE

THE WAY BACK

The transition back to life can be tricky for psychiatry patients. To ease that passage, UMMC provides BFAST (Bringing Families and Schools Together), a program that supports children, families and school staff through the work of trained people in two specialized roles.

The school transition specialist develops a transition plan, individualized for each student, then works with families and schools to carry out the plan.

The family connector offers ongoing support. When resources are needed, the connector seeks them out. When a listening ear is needed, the family connector is ready.

Since the implementation of BFAST, the impact has been felt far and wide. Parents feel their children’s needs are met. Students re-enter school seamlessly. Children and adolescents are less likely to need inpatient mental health care in the near future.

With the BFAST team, parents know they’re not in this alone. They have advocates by their side. They have support. They’re surrounded by people who care about their children. People who go out of their way to help children find success.

“We don’t work miracles—the human brain is too complex for that,” Dr. Edwards said. “But we’re making a difference in kids’ lives. We’re giving them skills, so when they face other challenges as adults, they’ll have the tools to handle them.”



Admittance to the new Child and Adolescent Psychiatric Unit at UMMC is by referral only. If you are concerned about possible harm to your child or others, take your child or adolescent to the nearest emergency department.

Addressing Behavioral Health Needs IN PRINCE GEORGE’S COUNTY

UNIVERSITY OF MARYLAND CAPITAL REGION HEALTH is working to address behavioral health needs in Prince George’s County. In addition to the 28-bed adult inpatient behavioral health unit at UM Capital Region Medical Center and partial hospitalization and intensive outpatient programs for adults at Laurel and Largo, UM Capital has created a safe space for children and adolescents in mental health crisis to be assessed and evaluated.

Most people in mental health crisis, including children and adolescents, seek care at an emergency department where they are often further traumatized because of the nature of the injuries and illnesses they are exposed to by other patients. UM Capital Region Medical Center is a Level II Trauma Center, so the risk is even higher.

To address this concern, UM Capital Region Medical Center built a separate unit for emergency behavioral health patients with a dedicated area for children and adolescents.

“This area shields the children from the rest of the ED patients and allows our specially trained psychologists and behavioral health specialists the opportunity to assess and stabilize them while we arrange for the appropriate level of care kids need,” said Kent Alford, RN, director of Behavioral Health Services at UM Capital. “We treat most adults with our own programs and have established partnerships with other organizations, such as Sheppard Pratt and Hope Health Partnerships, to help our child and adolescent patients. This new Child and Adolescent Psychiatric Unit at UMMC is a welcome addition to solutions we can offer our patients and their families.”



For more information, go to umcapitalregion.org/behavioralhealth.

Mental Health MANAGEMENT 101

MENTAL HEALTH CONDITIONS CAN AFFECT INDIVIDUALS AT ANY AGE, INCLUDING DURING CHILDHOOD AND ADOLESCENCE.

RECOGNIZING SYMPTOMS EARLY IS CRITICAL TO GETTING THE NECESSARY TREATMENT TO ENHANCE QUALITY OF LIFE.

Common behavioral problems and mental disorders in kids are anxiety, attention-deficit/hyperactivity disorder (ADHD), conduct disorder (CD), depression, obsessive-compulsive disorder (OCD), oppositional defiant disorder (ODD), post-traumatic stress disorder (PTSD) and Tourette syndrome.

WARNING SIGNS

- Avoiding food
- Drug and alcohol use
- Erratic behavior
- Mood swings severe enough to affect relationships
- Sadness or withdrawal persisting two weeks or longer
- Self-harm or suicidal tendencies
- Sudden and intense fear for no apparent reason that may also cause rapid breathing or heartbeat
- Trouble concentrating
- Uncharacteristic problems with academic performance
- Unusual changes in behavior and personality
- Worry that makes everyday tasks difficult



BY THE NUMBERS

1 out of 5

In the U.S., one out of five children from ages 2 to 8 has been diagnosed with a mental, behavioral or developmental disorder, according to the Centers for Disease Control and Prevention (CDC).

#2

Suicide is the second-leading cause of death in people ages 10 to 34, according to the CDC's leading causes of fatal injury data.

The National Suicide Prevention Lifeline provides 24/7 free and confidential support for people in distress and their loved ones.

Call 1-800-273-8255.

HERE TO HELP

A multidisciplinary team of mental health professionals at the University of Maryland Medical System offers expert diagnostics and treatment plans for a complete spectrum of mental health conditions affecting children and teens.

For more information on behavioral health services available in Prince George's County, visit umcapitalregion.org/behavioralhealth.

WELCOME

New Providers



KATERINA TSIAPALI, MD, FACS

Breast Surgeon, Director, Comprehensive Breast Program, UM Capital Region Health

Dr. Tsiapali is a board-certified general surgeon who is fellowship-trained in breast surgery.

As a woman, Dr. Tsiapali understands her patients and knows that treating breast cancer is about more than removing a breast or a tumor. She was at the forefront of the movement from a radical surgical approach to breast cancer to today's thoughtful, personalized approach. She uses oncoplastic techniques to help preserve and even improve the appearance of the breast, incorporating skin and nipple sparing mastectomies with reconstruction. This approach offers better cosmetic results and allows the patient to regain function.

Dr. Tsiapali sees patients in Bowie and performs procedures in Bowie and Laurel.



O. LAWRENCE STITT, MD, FACOG

OB/GYN, Director, Minimally Invasive Gynecologic Surgery, UM Capital Region Health

Dr. Stitt is a board-certified OB/GYN who specializes in minimally invasive gynecologic surgery. He helps women with a wide range of gynecological conditions, including abnormal bleeding, fibroids and endometriosis.

Dr. Stitt shows his commitment to his patients' health and well-being by listening to them and letting them express themselves in their own words, in their own time. He educates his patients in maintaining their overall female health to empower them to take care of themselves.

Dr. Stitt sees patients in Bowie, Laurel and National Harbor.



OLUWAYEMISI ADESIDA, MD, MSCPH

Internal Medicine - Pediatrics, UM Capital Region Health

Dr. Adesida is an internal medicine-pediatrics trained physician with an interest in adolescent medicine and transitional care.

Internal Medicine-Pediatrics is a division of primary care that provides comprehensive health care for the individual and family across all ages, genders, diseases and parts of the body. Dr. Adesida works with patients from newborns to the elderly, often within the same family. Dr. Adesida enjoys helping her younger patients with chronic disease as they move from adolescence to adulthood, so they can build healthy lifestyles and life-long health maintenance that may help to delay or prevent medical conditions in the future.

Dr. Adesida sees patients in Laurel and Suitland.



ALEXANDER KAYSIN, MD, MPH

Director, Family Medicine Program, UM Capital Region Health Medical Group

Dr. Kaysin has joined UM Capital Region Health Medical Group, bringing his passion for family medicine and obstetrics and his skills as an educator to the Family Medicine Residency Program. He is board-certified in family medicine and fellowship-trained in obstetrics.

Dr. Kaysin treats patients of all ages and has a particular interest in maternal-child medicine. He has dedicated his career to providing excellent quality of care across a wide spectrum of services and procedures.

In addition to his medical education, Dr. Kaysin also holds a Master of Science in Public Health with a concentration in social and behavioral sciences.

To make an appointment with one of these specialists, call **240-677-3000**.

UPCOMING COMMUNITY HEALTH PROGRAMS & EVENTS

VIRTUAL MENTAL HEALTH FIRST AID TRAINING

Just as CPR helps you assist an individual having a heart attack, Mental Health First Aid helps you assist someone experiencing a mental health or substance use-related crisis. Through this course, you learn risk factors and warning signs for mental health and addiction concerns, strategies for how to help someone in both crisis and non-crisis situations and where to turn for help. **Registration is required. Space is limited.**

- Adult Part 1: Thursday, Oct. 14, 12pm–5pm
- Adult Part 2: Friday, Oct. 15, 12pm–5pm
- Adult Full-Day Option: Saturday, Nov. 13, 9am–4pm

For additional information or to register for an upcoming class, please email umcapitalcommunityhealth@umm.edu or call **240-677-1093**. You must attend Parts 1 and 2 to receive certification.

DINE, LEARN & MOVE GOES VIRTUAL

Join us each month for 90 minutes of virtual fun. Get active, learn simple everyday tips for making healthy choices and engage with a chef while watching a cooking demonstration. Dine, Learn & Move is FREE and presented in partnership with Prince George's County Health Department, University of Maryland Capital Region Health, Suburban Hospital and M-NCPPC, Department of Parks and Recreation, Prince George's County. All ages are welcome.

- Wednesday, Sept. 22, 6pm–7:30pm
- Wednesday, Oct. 27, 6pm–7:30pm
- Wednesday, Nov. 17, 6pm–7:30pm

For more information visit wellness.pgparcs.com, email wellness@pgparcs.com, or call **301-446-6833**; **TTY 301-699-2544**. To register to attend this program, please email wellnessInfo@co.pg.md.us.

UM CAPITAL REGION HEALTH DIABETES PREVENTION PROGRAM (DPP)

You're thinking about making healthy changes to prevent Type 2 diabetes. A CDC-recognized diabetes prevention program can help you build healthy new habits that last a lifetime. When you join our lifestyle change program, you learn, laugh, share stories, try new things and build new habits—all while lowering your risk of Type 2 diabetes and improving your health. For more general information regarding the National Diabetes Prevention Program, visit: cdc.gov/diabetes/prevention.

- Space is limited. Participants will be accepted on a first come, first served basis.

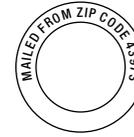
To discuss eligibility requirements and to register for UM Capital's upcoming Diabetes Prevention class, please call **301-254-6763** or email umcapitalcommunityhealth@umm.edu.

MAMA & BABY MOBILE HEALTH UNIT

Our mobile health unit is provided through a partnership with the March of Dimes and UM Capital and is specifically designed to help uninsured and under-insured women throughout Prince George's County receive quality health care for themselves and their babies. We see women of childbearing age and pregnant women. The unit is equipped with two private exam rooms and staffed by an experienced team of certified nurse midwives, family medicine physicians and medical assistants.

- By appointment only

Please call **301-437-5788**, Monday–Friday from 9am to 4pm to schedule an appointment.



Choosing the right care at the right time in the right place.

When you are sick or injured, you want to get relief quickly. But do you go to your primary care doctor, an urgent care center or the emergency room? Let this guide help you decide.

When to Visit Primary Care

For general illnesses, and non-urgent conditions, start with your primary care provider (PCP). All UM Capital Region Health Medical Group primary care locations have same day sick appointments available. Call 240-677-3000.



Sore Throat



Cold & Flu Symptoms



Poison Ivy



Rash



Eye Infections



Swimmers Ear



Cold Sore



Minor Sunburn



Mild Fever



Ear Infections

When to Visit Urgent Care

Can't get in to see your PCP but it's not an urgent condition? Go to your closest urgent care center.



Animal or Insect Bites



Minor Burns



Minor Cuts Requiring Stitches



Allergic Reaction



Sprains & Strains

When to Visit Emergency Room

Chest pain, acute onset illness or severe injuries need more care than your PCP or an urgent care center can offer. That's when you should go to the emergency room. UM Capital Region Health offers 24/7 emergency care in Bowie, Largo and Laurel.



Heart Palpitations or Heart Attack Symptoms



Stroke Symptoms (numbness, paralysis, slurred speech, etc.)



Abdominal or Chest Pain



Suspected Drug Overdose or Poisoning



Eye or Head Injuries



Difficulty Breathing



Babies Needing Immediate Care



Severe Burns



Broken Bones



High Fevers

When in doubt, call 911. For more information, visit umcapitalregion.org.