THE HEART OF THE MATTER
Expanding heart and vascular services

COVER PHOTO: Mohan Suntha, MD, MBA, President and CEO, University of Maryland Medical System; Jamie Brown, MD, Medical Director, Heart & Vascular Institute; Stacy Ashton, former patient; Guerda Dominique, PA-C, Heart & Vascular Institute; Joseph Wright, MD, MPH, FAAP, Senior Vice President and Chief Medical Officer, UM Capital Region Health at January 2020 launch event.

NOTE: All photographs taken during the COVID-19 pandemic were produced using appropriate prevention measures, including physical distancing and masking when distancing was not possible. Photographs without these measures in place were taken prior to the COVID-19 pandemic. During this time, we are taking extra steps to ensure your safety when you walk through our doors. According to the University of Maryland Medical System’s Universal Masking Policy, everyone must wear a mask inside at all times in UMMS facilities.

STAY CONNECTED WITH UM CAPITAL REGION HEALTH AT UMCAPITALREGION.ORG

@UMCapHealth
@UMCapital

WE WOULD LIKE TO HEAR FROM YOU
Please send us your comments, information requests or change of address to: Chante.Sedwick@umm.edu or University of Maryland Capital Region Health, c/d Marketing, 3001 Hospital Drive, Cheverly MD 20785; or call 301-618-6426.

CORRECTIONS: In the Spring 2020 issue of Maryland’s Health Matters, “Improving Patients’ Quality of Life” misidentified Ms. Janet Cashwell, who is pictured on the cover. Special thanks to Ms. Erlene Kelley for sharing her story in the feature article. In “The Skill to Rebuild and Restore,” the University of Maryland Orthopaedics at Camden Yards was incorrectly named part of the UM Rehabilitation Network.
Are You Ready for FLU SEASON?

The COVID-19 pandemic may be top of mind, but another dangerous respiratory illness—flu—is already circulating.

Flu cases typically peak between December and February. Here’s what you can do to prepare:

Get a Flu Shot Soon. Getting your flu shot as early as possible this year is even more important because of the pandemic. The Centers for Disease Control and Prevention (CDC) recommends everyone 6 months of age or older get a flu shot before the end of October. Your body needs about two weeks after you receive the shot to start forming protective antibodies, so if you get vaccinated in early fall, your immune system will be ready by the time flu season is raging.

No Excuses. Social distancing doesn’t make you immune to the flu. Don’t be afraid to get your flu shot. University of Maryland Medical System is taking many precautions to keep our facilities safe for care. There are also many other places where you can get the shot this year, including some pharmacies.

If you’re sick. If you have flu-like symptoms or don’t feel well, stay home. Preventing the spread of flu is always important but especially so this year. Reducing flu spread not only keeps others healthy, but it also reduces strain on the healthcare system as we fight the pandemic.

Get in a Good Hygiene Groove. If you start practicing preventive steps now—such as washing hands often, not touching your face, covering your mouth when coughing or sneezing, and sanitizing frequently touched objects and surfaces—they’ll be second nature by flu season.

To learn where you can get a flu vaccine near you, visit umcapitalregion.org/flu.

Um Capital Welcomes

New President & Chief Executive Officer

Nathaniel “Nat” Richardson Jr. was named the new president and chief executive officer for University of Maryland Capital Region Health on May 18. After a national search, Richardson was selected to lead UM Capital Region Health in its continued efforts to transform health care in Prince George’s County—a transformation that includes a focus on providing state-of-the-art clinical care with compassion and community leadership while meeting the highest standards of patient safety.

“I am very humbled and honored to have been selected to join University of Maryland Capital Region Health as president and CEO,” Richardson said. “I was drawn to the passionate commitment from executive leadership, medical staff, the board of directors and others who are laser-focused on providing high-quality patient- and family-centered health care to residents in Prince George’s County.”

Vision for the Future

“I joined UM Capital at a pivotal time as we near the opening of two new replacement facilities, including a new flagship hospital, University of Maryland Capital Region Medical Center, scheduled to open in 2021,” Richardson said. He continued, “My vision is that we all be reminded why we chose health care as we continue our mission to enhance the health and wellness of our patients and communities, providing state-of-art clinical care and community leadership with compassion, dignity and respect.”
UNIVERSITY OF MARYLAND CAPITAL REGION HEALTH’S NEWEST MULTISPECIALTY PRACTICE AT NATIONAL HARBOR OFFERS PRIMARY CARE AND A RANGE OF SPECIALTY CARE SERVICES. GET TO KNOW OUR TEAM OF EXPERIENCED PHYSICIANS.

OMECHE IDOKO-FORRESTER, MD
Family Medicine
Dr. Idoko-Forrester is a board-certified family medicine specialist with a heart for helping people and a passion for medicine. Dr. Idoko-Forrester works with patients of all ages, from newborns to the elderly, often within the same family. She believes in preventive medicine so she can help her patients get and stay healthy.

KIRK D. WILLIAMS, MD
Otolaryngology and Head and Neck Surgery
Dr. Williams is a board-certified otolaryngologist and head and neck surgeon. Dr. Williams treats the full range of ear, nose and throat disorders using medical and surgical techniques for patients 12 years of age and older. Dr. Williams is also trained to diagnose and treat larynx, oral and temporal bone cancers. As a head and neck surgeon, Dr. Williams performs a wide range of open, endoscopic and image-guided procedures.

MARC S. RICKFORD, MD, FACS
Bariatrics & General Surgery
Dr. Rickford is a general surgeon and bariatric specialist with extensive experience in minimally invasive techniques for bariatric procedures as well as complex abdominal surgery and hernia repair. As a general surgeon, Dr. Rickford treats conditions that require surgical intervention in the abdomen. Dr. Rickford is the medical director of the Bariatric Surgery Program.

PATRICIA SCRIPKO, MD, MA
Neurology
Dr. Scripko is a board-certified general neurologist with a special interest in headache. As a general neurologist, Dr. Scripko diagnoses and treats many conditions that affect the brain and nervous system. She is particularly focused on secondary headaches from systemic medical disorders and diseases.

SHEILA WOODHOUSE, MD, MBA, FACC
Cardiology
Dr. Woodhouse is a board-certified cardiologist with more than 18 years of experience. Dr. Woodhouse’s patient care expertise spans all areas of cardiovascular disease. She understands deeply the value of comprehensive, exceptional, high-quality patient service and care. Dr. Woodhouse is a longtime champion of the importance of individualized and preventive care, always putting the patient first.

VIKISHA FRIPP, MD, FACS
Plastic and Reconstructive Surgery
Dr. Fripp is a board-certified plastic and reconstructive surgeon. She performs the full range of cosmetic body procedures. She is a specialist in breast reconstruction after mastectomy and well known for her breast-reduction techniques. Dr. Fripp also performs non-surgical enhancement procedures for the face and eyes. Dr. Fripp serves as the chief of the department of surgery at University of Maryland Capital Region Surgery Center in Bowie.

To request an appointment with a physician at our new multispecialty practice at National Harbor, visit umcapitalregion.org/Harbor.
YOU’VE LIKELY COME ACROSS AT LEAST ONE OF THESE HEALTH MYTHS. HERE’S WHAT YOU NEED TO KNOW.

DO DIET SODAS really cause cancer? What is the best way to lose weight? Whether it’s through social media or advice from a friend, misinformation about health and wellness can spread quickly. Here are some common health myths, with the facts to set the record straight.

- **MYTH:** Cell phones/deodorants/artificial sweeteners cause cancer. No, these things do not cause cancer, according to the most recent studies cited by the National Cancer Institute. Cancer is caused by genetic mutations and must be treated by expert physicians and healthcare providers.

- **MYTH:** Vaccines cause autism spectrum disorder (ASD). There is no link between ASD and vaccines, and the ingredients in vaccines do not cause ASD. If you have questions about your child’s vaccine schedule or ingredients, discuss your concerns with your child’s primary care provider. The provider can explain the scheduling of your child’s vaccines and what makes them effective.

- **MYTH:** No-carb diets/vegetarian diets/gluten-free diets/this brand-new diet is the best way to lose weight! Fad diets may seem enticing, but it’s healthier for you to focus on eating a well-balanced diet of whole grains, healthy proteins, fruits and vegetables.

Learn more about our services at umcapitalregion.org.

**DO YOUR Research**

HERE’S HOW TO FIND RELIABLE HEALTH INFORMATION ONLINE.

WHEN MAKING DECISIONS about your health, doing your own research is a great way to begin, and the Internet gives you a wealth of information literally at your fingertips. It can be difficult to determine what is reliable information and what is not.

**SMART SURFING**

If you choose to do online research about health concerns, use these tips to ensure the information is current and accurate.

- **Be up to date.** Look for content that is relatively recent. Check near the bottom of the web page for a date when the site was posted or updated.

- **Check the address.** Websites that end in “.org,” “.edu” or “.gov” mean the sites are run by noncommercial organizations, educational institutions such as a university, or a government agency, respectively. These sources tend to be more reliable.

- **Don’t read the comments.** Avoid chat rooms, forum boards and discussion groups. This content is often not reviewed or regulated, and people may post incorrect or harmful information.

- **Search far and wide.** Even if you find a reliable source, don’t let it be your only one. Compare what you learn with other sources.

- **Talk to a person.** After you’ve done your research, discuss your findings with your healthcare provider. He or she will have a better understanding of your individual health needs, concerns and goals than any website.

Visit umms.org/email to subscribe to our Health Tips email list and receive information written by our expert providers.
IT’S NO SECRET that heart disease is a huge problem in Prince George’s County, and the COVID-19 pandemic has only worsened the situation.

“I live in this community and have for 30 years, and it is disturbing to see the disconnect between the per capita income of its citizens versus the health metrics, which are some of the more challenged in the state,” said Joseph Wright, MD, MPH, FAAP, senior vice president and chief medical officer of University of Maryland Capital Region Health. “When you stack it up against benchmarks across the country, we have a lot of room for improvement.”

That’s why Dr. Wright is excited about the future of the UM Prince George’s Hospital Center’s Heart and Vascular Institute, which, in summer 2021, will move into the new UM Capital Region Medical Center opening in Largo. The HVI provides comprehensive care for heart and vascular conditions, including preventive care, heart disease management, advanced minimally invasive and traditional heart and vascular procedures, cardiac rehab, and cardiac diagnostic testing.

“The HVI is more than just a heart center in a hospital,” said Jamie Brown, MD, an associate professor of surgery at the University of Maryland School of Medicine and medical director for the HVI. “Its mission is to provide excellent, patient-centered care to a community with diverse needs. We are also dedicated to extending that mission outside the hospital in the areas of prevention and education.”

A HEALTHY COMBINATION

The HVI launched in January 2020 to combine multidisciplinary care and clinical expertise with community education to better serve patients in the county.

“Even with the interruptions stemming from COVID-19, we’re growing fast and adding additional services that will benefit the patient population in this county,” Dr. Brown said. “That’s really exciting to me. The goal is to support our patients before they become critically ill.”

“A big part of that effort is health education and health literacy,” Dr. Wright added. “Too often, folks in our community respond to symptoms when they are at death’s door. We want to be much more engaged with the community and provide health education around early signs and symptoms, especially silent symptoms.”
The HVI is partnering with county and state health departments, along with the nonprofit sector in Prince George’s County, to increase awareness of heart disease.

In addition to educating patients about their conditions, the HVI will focus on condition management to prevent long-term complications. Eventually, the HVI will have specialized clinics to help patients manage heart failure, cholesterol and arrhythmia and offer anticoagulation therapy. According to Dr. Brown, these clinics will allow more patients to stay in regular contact with their physicians more easily.

“Our cardiovascular patients will be able to pick up the phone and talk to a trained professional about what kind of symptoms they’re having,” he said. “From that phone call, they can get advice specific to their condition, or we can ask them to come in for a quick appointment so we can make decisions about additional treatments they need to feel better.”

**PARTNERING WITH AREA CARDIOLOGISTS**

Another goal of the HVI is to increase access to cardiovascular care throughout Prince George’s County.

“What hasn’t been bolstered until now, and what the Institute brings to the area, is a direct linkage to community-based cardiologists, vascular surgeons and interventional cardiologists,” Dr. Wright said.

HVI providers will work closely with these physicians, who feel strongly aligned with UM Capital Region Health’s mission to connect patients with the comprehensive care they need.

“I’m really looking forward to what the future holds for us,” said Raj Shetty, MD, FACC, former director of the cardiac catheterization lab at UM Prince George’s Hospital and now an interventional cardiologist at Capitol Cardiology Associates.

“There is a large population in Prince George’s County that needs robust cardiac care. UM Capital Region Health, backed by a university, has a vast depth and understanding of this problem with their multiple institutions and state of the art care.”

“This collaboration brings a level of coordination that really benefits patients,” Dr. Wright added. “General cardiologists identify folks in the community who need a higher level of care, and our hospital-based cardiology team can get people in efficiently for diagnostic and therapeutic catheterization.”

“Too often, folks in this community respond to symptoms when they are at death’s door. We want to be much more engaged with the community and provide health education.”

—JOSEPH WRIGHT, MD, MPH, FAAP, SENIOR VICE PRESIDENT AND CHIEF MEDICAL OFFICER OF UM CAPITAL REGION HEALTH
HERE FOR THE COMMUNITY
Many of HVI’s staff members are longtime residents of Prince George’s County, which they say makes them even more dedicated to providing high-quality care.

“I’ve been in the county since I was 3,” said Sonia Brown, DNP, ACNP-BC, chest pain program coordinator at the I. “Our community needs people who care for them and understand their unique needs.”

UM Prince George’s Medical Center is a cardiac interventional center designated by the state of Maryland, and our door-to-balloon time (the amount of time it takes for a heart attack patient’s arrival at the emergency room to having his or her artery opened) is 90 minutes, meeting the guidelines of the American College of Cardiology and American Heart Association. Since the hospital relaunched its cardiac surgery program in 2014, it now has the highest grade from The Society of Thoracic Surgeons.

“Patients don’t have to leave the county get high-quality cardiac care,” Brown said. “That’s what we do. To see a patient who’s had cardiac arrest come in and be saved or go to the ICU for care walk out of the hospital—that’s the kind of care we provide, that’s our team-based approach.”

DEDICATED TO EQUALITY IN CARDIOVASCULAR CARE
Prince George’s County has a 62% Black population and a 20% Latino population. Given the significant racial disparities in health care outcomes in the area, The HVI is committed to helping people of color access the care they need for chronic heart conditions before those conditions have long-term, and potentially devastating, impacts on their health.

“We really want to get ahead of cardiovascular disease and prevent these folks from needing emergent, lifesaving procedures,” Dr. Wright said. “That’s what excites me most from my perspective as the chief medical officer and someone who has lived and raised my family in this county. It’s what residents need most out of the HVI.”

CARE THROUGH COVID-19
Prince George’s County has had the highest rate of coronavirus cases in the state, which has increased challenges for people seeking routine cardiovascular care. However, the HVI team quickly adapted to the challenge.

“We have a robust telemedicine platform now,” Dr. Shetty said. “The second day of the shutdown in Maryland, we started doing telemedicine.”

Dr. Shetty says the ongoing threat of COVID-19 is one reason patients should not postpone seeking cardiovascular care, as heart disease can lead to worse outcomes.

“All of our COVID-19 patients are now being treated outside the main hospital building,” Dr. Shetty said. “It provides a sense of security for other patients coming into the hospital.”

“This is a commitment from the entire University of Maryland Medical System, top to bottom, to provide the best possible care and patient experience as well as safety to patients in the Prince George’s community.”

—JAMIE BROWN, MD, AN ASSOCIATE PROFESSOR OF SURGERY AT THE UNIVERSITY OF MARYLAND SCHOOL OF MEDICINE AND MEDICAL DIRECTOR FOR THE HEART AND VASCULAR INSTITUTE

Do you need cardiovascular care? Make an appointment with your cardiologist or find one at umcapitalregion.org.
Maybe you aren’t comfortable returning to the gym in the middle of a pandemic, or maybe you’ve lost your job and had to cancel your membership.

Whatever your reasons for skipping the gym, it’s easy and inexpensive to stay in shape at home. It’s important, too. The U.S. Department of Health and Human Services says children ages 6 through 17 should get at least an hour of moderate physical activity every day, and adults should get at least 30 minutes a day, five days a week.

Go online. If you have a smartphone, you have access to thousands of workout videos for free on YouTube. Yoga, Zumba, powerlifting—it’s all there. Make sure the instructor has a reputable fitness certification before following along, and if you aren’t sure, skip it. (Some gyms and yoga studios are also streaming classes on their websites or on social media.) YouTube can also be a great way to get the whole family exercising, as some of the most popular fitness channels are geared toward kids.

Take a walk. Walking is easy, safe for all ages and most health conditions, and it’s free. If your neighborhood isn’t pedestrian-friendly, there are parks all over Maryland where you can take a leisurely stroll or a more vigorous hike.

Try an app. Peloton is known for its expensive bike that offers remote trainers pushing you on, but you don’t need to spend thousands of dollars. Several paid fitness apps for your phone or tablet offer virtual coaching for just a few dollars a month—just make sure the trainer is a certified professional.

Take steps for injury prevention. Stretch beforehand, and drink plenty of water. Challenge yourself to do an extra 15 seconds of aerobic exercise or one more body-building repetition each session to gradually increase your stamina and lean muscle mass.

If you aren’t sure if your exercise routines are getting the right results, or if they are causing you pain, call your doctor. Many injuries will only get worse if left untreated.

HAVEN’T WORKED OUT IN A WHILE?
Get a check-up with one of our providers to help ensure you don’t end up with an injury. Visit umcapitalregion.org/primarycare to find a doctor today.
READY FOR COVID-19:

ACTIVATING A BIOCONTAINMENT UNIT FOR THE SICKEST PATIENTS
COVID-19: SICKEST PATIENTS
UNIT FOR THE BIOCONTAINMENT

ACTIVATING A 10/1/20 10:19 AM

KNOWING THAT VERY sick and contagious patients were imminent because of COVID-19, teams at the University of Maryland Medical Center (UMMC) began preparing long before coronavirus was declared a pandemic.

In 2014, when there was concern over a possible Ebola outbreak in the United States, UMMC established a Biocontainment Unit (BCU) by readying people and adapting part of an existing intensive care unit. Dedicated to containing and caring for infectious disease patients, a multidisciplinary team was prepared to deliver greater care under uniquely challenging circumstances.

No Ebola cases came to Baltimore, but the BCU remained part of UMMC’s emergency planning. The staff trained regularly and readied themselves for different scenarios that could lie ahead.

Fast forward to 2020: The BCU became the first COVID-dedicated unit in the University of Maryland Medical System (UMMS), and where the first critically ill patients came. The sickest COVID-19 patients in UMMS community hospitals across Maryland would be transferred to UMMC when they required the advanced care that an academic medical center can provide. The team quadrupled in size and played an essential role in caring for COVID-19 patients, especially those needing life support.

“What’s significant isn’t that we created a unit, it’s that we have medical professionals, nurses and ancillary staff from different backgrounds, coming together and seamlessly working together to treat the sickest patients,” explained Louie Lee, RN.

Every person on this team volunteers for the post. It is an array of people from various specialties, including medical and intensive care, as well as pediatrics, labor and delivery, outpatient care, respiratory therapy and other rehabilitation services. “To see everyone perform at such a high level is mind-blowing,” said C. Pat Lombardi, RN, another member of the BCU.

ACTIVATING THE BCU

“When we activated the Biocontainment Unit this time, it was hectic, and we did not know what to expect,” said Corey Stults, RN. But he is quick to point out that things normalized quickly.

In addition to adding more staff, the BCU’s initial location was moved to a wing within the R Adams Cowley Shock Trauma Center where it could accommodate up to 32 patients, many on advanced life support. It also needed negative-pressure rooms to prevent the virus from becoming airborne.

“We spent time getting the rooms fully ready. For instance, we included specialty beds that turn patients regularly,” says Lee. These high-tech beds help prevent complications from being in one position for too long.

“We were ready. Without exception, everyone was stepping up, making a difference. It was nurses, techs, unit secretaries, social workers all together with one common goal,” said Hannah Entwistle, RN.

The BCU was not the only unit caring for COVID-positive patients, but it remained the place for the sickest patients throughout the state who needed the most advanced care.

ON THE UNIT

At a quick glance the BCU looks like a typical intensive care unit (ICU), but some things are noticeably different. “It is very quiet and there are a lot less people. It’s almost a little eerie when you enter,” said Natalie Mollish, RN, a nurse in the BCU.

The patients are behind the “airlock” in the “Hot Zone.” Many of them are on both ventilators and ECMO (extracorporeal membrane oxygenation), a technology that takes over the work of the lungs—keeping a patient’s blood full of oxygen—until they can heal. No one is allowed to just walk in. There are two sets of doors to ensure infection prevention and extensive protocols about what must be worn when entering the space.

The trends the public has heard about COVID-19 patients are consistent in the BCU. For instance, a patient can be any age. The common thread is that they are very sick, with many body functions shutting down.

SUSTAINING LIFE

UMMC is one of the leading hospitals in the country in its pioneering use of ECMO, with one of the largest ECMO programs in the country. Physicians and nurses have saved the lives of patients by using ECMO for critically ill patients after traumatic injury, organ failure and other life-threatening conditions. Now, it is being used to help COVID patients survive.

“ECMO is an extreme type of life support. This technology is not a treatment. It does not fight COVID, but it helps keep the body from further organ failure. It is highly specialized, very labor intensive and requires specific training, so it is not available everywhere and is only at two hospitals in the state,” explained Ali Tabatabai, MD, assistant professor of medicine at University of Maryland School of Medicine and BCU Medical Director.

DONNING AND DOFFING PPE

Personal protective equipment (PPE) is vital in keeping the clinical teams safe. The specific way the PPE is put on and taken off is called donning (putting on) and doffing (taking off).
There are staff dedicated to ensuring PPE is donned and doffed properly. It takes 5 to 10 minutes to don the PPE. Doffing can be lengthier since the team must be extra careful not to contaminate themselves.

Wearing so much PPE is a different way of working. Fans designed to keep air flowing out of the head coverings protect the wearer from COVID but can make it difficult for staff to hear one another.

**DIFFERENT STYLE OF NURSING**
The way teams care for patients is a little different as well. In the ICU, a nurse will oversee one or two patients whom they know “inside and out,” said Stults. In the BCU, team-based nursing has been initiated where intensive care nurses and intermediate care nurses are paired together to care for up to four patients at once.

Entwistle likens it to football. “Instead of one on one, we are using zone defense. We are taking care of twice the number of patients but in a team.”

“In the ICU, it’s hard enough to help families understand what is happening to their loved ones when they can see them. It’s that much harder for them to understand what is happening when they can’t see them,” said Stults. Often staff relied on tablets as a way for family to see their loved one since visitor policies had to change during the pandemic.

**CELEBRATING THE WINS**
It is impossible to predict how COVID-19 will impact a person. There have been victories inside the BCU. The very first patient recovered and the team continues to get updates on his progress. Another patient was a new mom who recovered and was reunited with her baby. These successes are celebrated by the team and give them hope that others will survive.

“When it comes to COVID-19, every person is on the frontline, including everyone who is at home and anyone wearing a mask. When patients reach us in the BCU, we are the last line,” explained Entwistle. But those very sick patients have a team inside this academic medical center fighting for their survival. Every person in the BCU, covered from head to toe in PPE, is putting every effort on the line to positively impact the lives of the sickest Marylanders fighting COVID-19.

**UM CAPITAL REGION HEALTH CONTINUES TO CARE FOR ALL PATIENTS DURING THE PANDEMIC**

Consumer polls show that many patients avoid going to the hospital for even life-threatening conditions because they are afraid of getting COVID-19. University of Maryland Capital Region Health has developed a comprehensive plan to keep all of our patients safe by providing physical separation of patients with critical and non-critical COVID-19 using stand-alone COVID-19-only intensive care units.

Called "PODS," these state-of-the-art modular units are fully equipped with the same diagnostic and therapeutic equipment as a regular in-hospital ICU. And, because the virus that causes COVID-19 is thought to be transmitted by airborne particles, each room in these freestanding units uses its own negative pressure ventilation. That means the air is vented directly to the outside and does not circulate inside the room or unit.

The PODS were approved for patients with COVID-19 in early July by the Office of Health Care Quality. This allows UM Capital Region Health to keep our in-hospital services available to patients who have tested negative for COVID-19 so they can feel safe coming in for a non-COVID-19-related emergency and non-emergency care.

Hear more from the team in the Biocontainment Unit at umm.edu/BCU.
Where to Turn FOR CARE

UNIVERSITY OF MARYLAND MEDICAL SYSTEM PROVIDES SEVERAL WAYS FOR PATIENTS TO GET THE CARE THEY NEED BASED ON THE URGENCY OF THE SITUATION.

DOCTOR'S OFFICE $
Your primary care physician knows you best, so turn here first unless your need is urgent. Best for:
- Routine wellness visits, preventive care and immunizations
- Treating rashes, cold and flu symptoms, high blood pressure, tooth pain, sore throat, pink eye, lower back pain, animal or insect bite, urinary tract infections
- Diabetes management, Pap smear, colonoscopy

TELEMEDICINE VISIT $
Remote visits are convenient and provide social distancing. Best for:
- Treating seasonal allergies, sinus infection, rash, conjunctivitis, headache, back strain, minor burns, urinary tract infections, cold and flu symptoms
- Managing asthma, COPD and other pulmonary conditions, behavioral health, cancer treatment symptoms, diabetes, gastrointestinal conditions, high blood pressure and many other heart and vascular conditions, neurological conditions, pain management, palliative care, and some prenatal appointments

PATIENT HEALTH PORTAL [$]
A secure online portal supplements telemedicine or doctor’s office visits by providing access to health information anywhere with an internet connection. UMMS patients use MyPortfolio. Best for:
- Direct messaging for answers to basic medical questions
- Accessing test results
- Requesting appointments and prescription refills
- Check in online before an appointment

URGENT CARE CENTER $$
Turn here if you have an urgent but not life-threatening need for care when your doctor’s office is closed, your doctor is unavailable or you don’t have a primary care physician. Best for:
- Treating sprains and strains, injuries requiring stitches, cold and flu symptoms, sore throat, rash, pink eye, tooth pain, lower back pain, animal or insect bites, urinary tract infection

EMERGENCY ROOM $$$
Seek emergency care immediately in a potentially life-threatening situation. Best for:
- Allergic reactions, breathing problems, babies needing immediate care, serious eye or head injuries, severe burns, suspected drug overdose, poisoning, severe abdominal pain, severe chest pain, possible heart attack or stroke symptoms, high fever

COST FOR MOST INSURED PATIENTS
[$] = free
$ = most affordable
$$ = more expensive
$$$ = can be very expensive

To find out how to access care near you, including telemedicine virtual visits with a doctor, visit umms.org.
UM CAPITAL REGION HEALTH is moving forward to fulfill its mission to make high-quality care more accessible to the communities we serve. The organization has five campus expansion projects underway that will enhance the health care offerings in Prince George’s County and surrounding areas.

While addressing the needs of patients and caring for our community during an unprecedented pandemic has been challenging, there is much excitement about the expansion projects underway at UM Capital.

The opening date for the new UM Capital Region Medical Center is June 12, 2021. While the construction schedule of the building has not changed, the opening date was moved from April 2021 to provide more time to prepare the organization for the move.

The new medical center in Largo is not the only exciting program expansion in the organization’s future. UM Capital Region Health Medical Group opened a new outpatient practice at National Harbor on July 6, 2020. The Medical Group is currently taking appointments for that location. Call 301-618-2273 for an appointment.

WHAT ADDITIONAL PROJECTS ARE UNDERWAY?

On the campus of the new UM Capital Region Medical Center is a planned four-story UM Capital Region Health outpatient building, which will replace the outpatient practice located in Cheverly. Construction is scheduled to start in January 2021. The opening is anticipated for fall 2022.

Construction will soon begin on a premier health and wellness care campus in Laurel to meet the needs of Prince George’s County and surrounding areas. This new campus will offer comprehensive, patient-centered outpatient medical services and wellness programs that aid in disease prevention and management. Phase one of the Laurel Health and Wellness campus plans includes construction of a new Medical Office Building, which will open in spring 2022 along with the new University of Maryland Laurel Medical Center. Groundbreaking for the campus is expected in fall 2020.

We are excited to grow as we continue to serve Prince George’s County. Follow our expansion journey and look for updates on our website at umcapitalregion.org/future.
UPCOMING COMMUNITY HEALTH PROGRAMS & EVENTS

MAMA & BABY MOBILE UNIT
- **By Appointment Only**
- **Bus Location:** 2900 Mercy Lane, Cheverly Lane (On the campus of UM Prince George’s Hospital Center)

The Mama and Baby Bus is currently open and available to serve the community on the campus of University of Maryland Prince George’s Hospital Center. Due to the coronavirus pandemic, appointments are now required until further notice.

The mobile unit is adhering to strict Centers for Disease Control and Prevention (CDC) Clinical Care Guidelines. For further information on protocols and to make an appointment, please call 301-437-5788.

LET’S TALK ABOUT: BREAST CANCER AWARENESS, RISK REDUCTION & COMMUNITY RESOURCES
- **Date:** Wednesday, Oct. 28, 2020
- **Time:** 12pm–1pm

During Breast Cancer Awareness Month, University of Maryland Capital Region Health is hosting a virtual event to provide education about breast cancer risk reduction and community resources.

Please call 301-254-6763 or email umcapitalcommunityhealth@umm.edu for more information regarding registration.

ONLINE NATIONAL DIABETES PREVENTION PROGRAM (NDPP)
- **Date:** Online class to start Oct. 26, 2020

Are you thinking about making healthy changes to prevent Type 2 diabetes? A CDC-recognized diabetes prevention and lifestyle change program can help you build healthy new habits that last a lifetime.

When you join a lifestyle change program, you’ll learn, laugh, share stories, try new things and build new habits—all while lowering your risk of Type 2 diabetes and improving your health.

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. Space is limited. Participants will be accepted on a first-come, first-served basis. For more general information regarding the National Diabetes Prevention Program, visit cdc.gov/diabetes/prevention.

LET’S TALK ABOUT HEALTH: A COMMUNITY CONVERSATION
- **Date:** Third Wednesday of each month
- **Time:** 12pm

Tune in for a lunchtime webinar series on a different health topic each month. Topics include: Accessing Care, Children’s Health & Safety, Men’s Health, Women’s Health, Diabetes, Pulmonary Health, Pharmacy/Medication, Cardiovascular Health, Advanced Directives, Asthma, Stroke, and more!

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