

# MARYLAND'S

## HEALTH MATTERS



COVER STORY

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ACADEMIC MEDICINE AT WORK

NOT A STROKE, A WAKE-UP CALL: A NETWORK OF CARE RESTORED A YOUNG MAN'S BRIGHT FUTURE

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UNIVERSITY of MARYLAND MEDICAL SYSTEM



## COMPREHENSIVE CARE FOR WOMEN AT TWO NEW LOCATIONS

New centers at La Plata and White Plains make it convenient to access women’s health care.



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## A STROKE OF FATE

A patient care technician received lifesaving treatment in the emergency room where her daughter works.

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## ACADEMIC MEDICINE AT WORK

Not a Stroke, a Wake-Up Call—Emergency neurosurgery was the first step to a bright future.



## STAY CONNECTED WITH

# UM CHARLES REGIONAL MEDICAL CENTER

### NOEL A. CERVINO

President/Chief Executive Officer

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# MESSAGE FROM THE CEO



**OUR HOSPITAL IS** committed to providing our community with high-quality, highly reliable medical care inside and outside of the hospital, and to offering programs that help you maintain your good health.

In our cover story, you'll read how we strive to deliver the

highest quality of care at our University of Maryland Charles Regional Medical Group - Women's Health practices. With brand-new offices in White Plains and La Plata, we provide a first-rate patient experience by providing space for procedures and medical tests, adding new providers to expand patient access, and offering care in a convenient and comfortable setting.

Key to our commitment as a community hospital is to provide services and education that help community members manage their own health and avoid unnecessary hospital visits. That commitment underlies our participation in the Dare to C.A.R.E. program, through which we fight heart disease by offering free cardiovascular screenings to community residents.

Our commitment to our community's health is extensive. We are currently updating our Community Health Needs Assessment, which will identify the most pressing health needs in Charles County and direct our outreach and education efforts for the next three years. We offer events and classes that help people manage diabetes, address hypertension, recognize and react to stroke symptoms, develop healthy eating habits, and maintain an overall healthy lifestyle.

We want you to rely on our hospital, our medical practices, and our educational programs and resources for your health and medical needs so we can help you live the healthy, active lifestyle you deserve.

**Noel A. Cervino**  
President & CEO

## HOSPITAL DARES TO C.A.R.E. WITH FREE VASCULAR SCREENING CLINICS

UNIVERSITY OF MARYLAND CHARLES REGIONAL MEDICAL CENTER HOSTS FREE MONTHLY DARE TO C.A.R.E. SCREENING CLINICS TO HELP PREVENT VASCULAR DISEASES THAT OFTEN GO UNDETECTED UNTIL IT'S TOO LATE.

**THE NATIONAL DARE** to C.A.R.E. program is administered by the Heart Health Foundation and has filled nearly every appointment slot each month.

"We are always looking for ways to give back to our community," said Mary Hannah, UM Charles Regional's vice president for population health. "To see this many community members treat their health as a priority fills me with pride."

The vascular screening program's Dare to C.A.R.E. moniker is an acronym for:

- **Carotid artery disease:** A primary cause of preventable strokes
- **Abdominal aortic aneurysms:** Ruptured aneurysms that cause death in up to 90% of cases
- **Renal artery stenosis:** When untreated, frequently leads to the need for dialysis
- **Extremity artery disease:** Affecting up to 12 million Americans, especially those over 50 years of age

The program is for people who meet any of the following conditions: over 60 years old; over 50 with certain risk factors such as obesity, smoking or a family history of stroke; and over 40 diagnosed with diabetes.



The free screenings are held at 8 Kent Avenue in La Plata every first Tuesday of the month. Appointments are required and can be made by calling **410-573-9483**.



Peggy Kidwell, a registered vascular technologist with the University of Maryland School of Medicine, conducts a vascular screening on Craig Renner, director of marketing and communications at UM Charles Regional Medical Center, at the first Dare to C.A.R.E. vascular screening clinic in December 2022.

Meaghan Beasley, left, and her mother, Beth Beasley, are both patient care technicians at UM Charles Regional Medical Center in La Plata.



## A STROKE OF FATE

HER DAUGHTER'S QUICK THINKING SAVED THE DAY.

**AS A PATIENT** care technician at University of Maryland Charles Regional Medical Center, Beth Beasley knew she deeply understood the patient experience in the hospital's emergency room. She just never expected she would live that experience herself until last summer.

"It was a normal day," Beth said as she reflected on July 26, 2023. "I woke up and was getting ready to go to an appointment, but I wasn't feeling myself. I felt a little off. I just thought that maybe I was tired, so I lay back down for an hour or so.

"I got back up, and I thought to myself, 'Listen, you have to drive an hour and a half to get to the appointment. There's no way you can drive that.'"

Needing help, she reached out to her daughter, Meaghan Beasley, who is also a patient care technician at UM Charles Regional. Meaghan rushed over to see how Beth was doing and assess the situation.

"Her pulse felt fine," Meaghan said. "So, the only other thing I could think of was that she was having a ministroke. We couldn't find her blood pressure cuff, so I told my mom,

## SUSPECT STROKE? B.E. F.A.S.T.

While stroke is one of the leading causes of death in the U.S., not all people know the signs of one. Use the acronym “BE FAST” to spot the signs of a stroke and know what to do if someone is experiencing one.

- **B—Balance:** Is the person having trouble with balance or coordination?
- **E—Eyes:** Is the person experiencing blurred or double vision, or loss of vision in one or both eyes?
- **F—Face drooping:** Does one side of their face droop, or is it numb? Ask the person to smile.
- **A—Arm weakness:** Is one arm weak or numb? Ask the person to raise both arms. Does one arm drift downward?
- **S—Speech:** Is speech slurred, are they unable to speak or are they hard to understand? Ask the person to repeat a simple sentence like, “The car is fast.”
- **T—Time to call 911:** If the person shows any of these symptoms, even if the symptoms go away, call 911 immediately.

“We’re going to get you to the hospital. You need to get your head scanned.”

When they got to the hospital, the caregiver became the patient—and she experienced firsthand the exceptional care provided by the UM Charles Regional stroke team and emergency room staff. Once they arrived at the ER, Beth and Meaghan were immediately met by the stroke team. Michael Frasier, MD, assessed Beth and quickly concluded that she could be having a stroke. The stroke team rushed her for a CT scan, then began administering TNK (tenecteplase, a powerful blood-thinning medication used to treat a stroke caused by a blood clot).

“Throughout the entire process, the team definitely responded very well,” Meaghan said of the staff’s proactive and thoughtful communication. “They told us the entire process of what was going to happen, and they explained everything so well that I didn’t have any questions.”

After a day spent under observation in the intensive care unit (ICU), Beth was transferred to 3 East and discharged soon after. She is almost fully recovered now and only experiences minor communication complications, which she says are improving. She credits her dedicated team of coworkers with her successful recovery.

“I couldn’t be more proud of the team that took care of me that day,” Beth said, “and it’s not just the ER team. It goes all the way up to the ICU and the hospital. They all work like a family. I can’t thank them enough for taking great care of me. I wouldn’t have wanted to go anywhere else.”

While she trusts the stroke team and ER staff at UM Charles Regional “100%,” she is quick to remind everyone to avoid ignoring the signs of a stroke or another medical condition.

“You need to pay attention to your body,” she said. “Don’t shrug it off. Go in and get checked out. The team at UM Charles Regional is always swift in taking care of you and working to fix what’s wrong.”



The Beasleys pose at the temporary emergency entrance to UM Charles Regional Medical Center in La Plata.



To learn more, visit [umms.org/charles/er](https://umms.org/charles/er).

# Comprehensive Care for Women

AT TWO NEW LOCATIONS

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Erica Contreras, MD, leads the UM Charles Regional Medical Group - Women's Health team at the La Plata office.

THE WOMEN'S HEALTH PRACTICES HAVE MOVED TO SPACIOUS NEW FACILITIES IN LA PLATA AND WHITE PLAINS, OFFERING ENHANCED COMFORT, MORE PROVIDERS AND ADDITIONAL SERVICES.

**THE TEAM AT** University of Maryland Charles Regional Medical Group has always been committed to providing the highest quality of care at its two women's health practices. In response to the growing needs of the community, each practice moved into a brand-new space in October 2023. Women's Health at La Plata moved to a new space on Charles Street, while Women's Health at Waldorf is now located in White Plains.

Both facilities provide beautiful, comfortable environments for patients while allowing for the team to expand with more providers.

"Our team is dedicated to your health and well-being, and we've designed our new spaces with your convenience and satisfaction in mind," said Tania Morton, practice manager. "The driving force behind the decision to move to new locations was our commitment to addressing the evolving needs of our community. We offer the same excellent care in more modern, patient-centric settings."

## ENHANCING THE PATIENT EXPERIENCE

The new facilities feature welcoming environments with more space for patient-friendly amenities.

"Our aim is to make each visit as comfortable and stress-free as possible," Morton said.

Patient benefits at the new women's health facilities include:

- **Additional space for outpatient procedures and testing.** The new facilities offer larger procedure rooms, reducing wait times for scheduling by allowing for some procedures that previously had to be done in the outpatient hospital setting to be performed in the office. Additional rooms for exams, sonograms and non-stress tests are also available, making it easier and faster for patients to schedule.
- **Easy accessibility.** The new facilities are strategically located to prioritize patient accessibility. This helps ensure that quality health care is within reach for all women in the community.
- **New providers.** The expanded facilities will accommodate additional providers, allowing each practice to serve more patients.
- **Welcoming environments.** The new interiors have been designed with patients in mind and provide tranquil settings.

"The new spaces are more aesthetically pleasing," said Evalyne Bryant-Ward, DBA, director of operations at UM Charles Regional Medical Group. "No matter why a patient is there, it's nice for them to be able to sit in a beautiful space while waiting to see their provider."

Patients can expect the same high-quality, compassionate care they have always received at UM Charles Regional. To provide that care, the new facilities will house a broad range of services, ensuring

## SERVICES AND LOCATIONS

Both new women's health facilities offer the same comprehensive services, including:

- **Gynecological care.** This includes routine checkups, preventive care, screenings for cervical cancer and breast cancer, and care for other reproductive health issues.
- **Family planning.** Providers offer contraception solutions and counseling.
- **Menopause management.** This includes comprehensive support and treatment for women experiencing perimenopause and menopause.
- **Obstetrics.** We offer a full range of prenatal care, childbirth services and postnatal care.
- **Pelvic health.** Providers evaluate and treat pelvic floor disorders, including incontinence and pelvic pain.
- **Reproductive health.** Patients have access to a range of services related to infertility, fertility preservation and reproductive health concerns.
- **Sexual health.** Testing and treatment are available for sexually transmitted infections and sexual dysfunction.
- **Women's wellness.** Patients can receive general health screenings and preventive care and participate in wellness programs.

### La Plata

101 Charles Street, Suite 104  
La Plata, MD 20646

### White Plains

5010 Regency Place, Suite 301  
White Plains, MD 20695



David Caiseda, MD, UM Charles Regional Medical Group – Women's Health medical director, sees patients at the new White Plains office.

that women can receive multifaceted care. Services range from routine checkups and screenings to specialized treatments and procedures.

Patient education also makes up a big part of the new centers' offerings. The team is committed to fostering a proactive approach to personal well-being by providing patients with resources and information to empower them in their health care decisions.

And, recognizing that each woman is on a unique health journey, the teams at the new facilities are trained to offer individualized care plans, tailored to each woman's specific needs and concerns.

## NEW IN-OFFICE PROCEDURES

A hospital visit can result in missed work and family time, as well as additional cost and stress for patients. At the new women's health facilities, more procedures than ever will be available on-site for patient convenience.

"We are thrilled to expand our in-office procedures, reducing the necessity for patients to be scheduled in the hospital," Morton said. "One of these procedures is

a hysteroscopy system that allows health care providers to examine the inside of a woman's uterus for diagnostic purposes."

A hysteroscopy is a procedure in which a thin, lighted device that works like a telescope, called a hysteroscope, is inserted through the vagina and into the uterus. The device projects an image of the uterus on a screen, allowing the provider to view the uterine lining as well as the openings of the fallopian tubes. The procedure can help providers diagnose conditions such as uterine fibroids, polyps, abnormal bleeding and other conditions.

"We're glad we can now perform hysteroscopy in the office," said David Caiseda, MD, UM Charles Regional Medical Group - Women's Health medical director. "This alleviates the need for patients to have the procedure at the hospital and wait for a lengthy preoperative process."

Additionally, providers at the new facilities will be able to perform manual vacuum aspiration procedures in office. This procedure can be performed for patients who have experienced early pregnancy loss.



David Caiseda, MD, UM Charles Regional Medical Group - Women's Health medical director, leads the medical team at the new White Plains office.



## WOMEN'S HEALTH ACROSS THE LIFESPAN

At all UM Charles Regional facilities, women can find the highest level of care from adolescence through the reproductive years.

"We take pride in providing women with all the services they may need from puberty to menopause and beyond," Dr. Caiseda said.

Services range from preventive screenings to advanced treatments and everything in between.

"We always put our patients first," Bryant-Ward said. "We are very passionate about issues that concern women. We do an excellent job addressing those needs close to home."

To do this, providers at UM Charles Regional take a collaborative, patient-centered approach.

"Our health care professionals take the time to listen, understand and work alongside each patient," Morton said. "This extra time ensures the patient's voice is always at the center of their care."

## EXPERIENCE LEADS TO EXCELLENCE

Patients can also feel secure knowing that UM Charles Regional providers are highly experienced in their fields.

"Our medical professionals are not only highly qualified but also bring a wealth of experience," Morton said. "This depth of knowledge and expertise ensures that our patients receive top-tier care tailored to their specific needs."

The science of women's health is constantly changing, with new advances coming out every year to help treat a challenging condition or offer deeper understanding of women patients and their needs.

In response to the ever-evolving field of women's health, providers at UM Charles Regional are dedicated to staying up to date on the latest treatments and technologies. They have access to research and clinical trials taking place at the University of Maryland Medical System. Whether guiding a patient to a relevant clinical trial or enhancing their understanding of culturally competent care, they leverage this knowledge in ways that are most beneficial to the community.

"As a local institution, we have a deep connection with and understanding of our community's needs," Morton said. "This means our services are not just technically excellent, but also culturally sensitive and community oriented."



Learn more about our compassionate, comprehensive women's care. Visit [umms.org/charles/crmg/services/womens-health/specialists](https://umms.org/charles/crmg/services/womens-health/specialists).

## HELPING NEW MOMS RAISE HEALTHY BABIES

The Baby Closet provides mothers in need with essential items to care for their newborns.

When community outreach manager Mary Levy noticed that many new mothers didn't have some of the necessary items to take care of their babies after they left the hospital, she knew she wanted to do something to help.

"Charles County has higher rates of infant death than the Maryland and national averages," Levy said. "Giving resources such as diapers, wipes, car seats, and pack and plays can make a big difference and help make the first months a little easier."

In 2022, Levy helped launch a regional Baby Closet, a partnership between University of Maryland Charles Regional Medical Center and the Maryland Diaper Bank, which delivers diapers, wipes and other supplies to the Baby Closet monthly. When the project first began, the diaper bank donated 3,200 diapers and 4,600 wipes to help get the program off the ground.

"Other items, such as car seats, blankets and bassinets, have been purchased with grant money," Levy said.

In 2023, UM Charles Regional obtained \$30,000 in Health Disparities Funding through the Charles County Department of Health. In addition to car seats, pack and plays, and other items, the money was used to purchase postpartum kits, which include blood pressure monitors and a New Mom's Handbook available in English and Spanish.

## HELP FOR EVERYONE WHO NEEDS IT

All new mothers who qualify and are residents of Charles County are eligible to take advantage of the Baby Closet. After calling to make an appointment, the mother can receive diapers and wipes up to twice a month until the baby reaches 6 months of age. Bigger items are given based on need.

"Having a newborn at home is an exciting time, but it's a lot of hard work," Levy said. "With UM Charles Regional Baby Closet, families can receive needed items just by reaching out."

The Baby Closet is open Monday through Friday by appointment only. To make an appointment, call **301-609-4415** or email Mary Levy at [Mary.Levy@umm.edu](mailto:Mary.Levy@umm.edu).



# NOT A STROKE— *A Wake-Up Call*

A NETWORK OF CARE BROUGHT KASEY TRENT FROM EMERGENCY ASSESSMENT THROUGH SPECIALIZED CEREBROVASCULAR NEUROSURGERY, RECOVERY AND INTENSE REHABILITATION TO A BRIGHT FUTURE.

**KASEY TRENT, 27**, has the sort of vibrant, independent life many 20-somethings crave. The Freeland, Maryland, native lives and works in San Diego, California, where he spends his free time playing sports and hanging out with friends. Given his youth, the best, it would seem, is yet to come. Two and a half years ago, however, Trent's bright future was clouded by a rare brain condition.

During the summer of 2021, not long after moving to California, Trent began experiencing strange symptoms—an uncharacteristic loss of balance while snowboarding and tingling in his face, tongue and fingertips while eating a piece of cake. Something was wrong, but Trent assumed it was minor.

"I thought I was having an allergic reaction to something," he said. "When you're my age, the idea there might be an issue with your brain is the last thing you think about."

### RECEIVING A RARE DIAGNOSIS

During visits home to Maryland in November and December 2021, Trent's mother, Zhanna, could tell her son didn't feel like himself. The difference was especially apparent during the December trip. The left side of his body seemed weak, and his speech wasn't quite right.

"He was talking as if something was in his mouth," Zhanna said.

Suspecting a stroke, Zhanna took her son to the Emergency Department at University of Maryland St. Joseph Medical Center in Towson. Scans revealed something far less common than a stroke: a cavernous malformation—a tightly packed bundle of abnormal blood vessels (See page 12 for more information.) Located within Trent's brainstem, the cavernous malformation caused a bleed, and the group of vessels was so large it was putting pressure on structures within the brainstem that help regulate movement, heart rate and other vital functions.

When Mohamed A. M. Labib, MD, an assistant professor of neurosurgery at the University of Maryland School of Medicine, learned about Trent's case, he knew he was perfectly positioned to help. A cerebrovascular neurosurgeon who specializes in treating cavernous malformations of the brain, Dr. Labib contacted Zhanna and advised her to bring her son to University of Maryland Medical Center, the academic medical center of University of Maryland Medical System, in downtown Baltimore. There, he could receive the highest level of neurosurgical care. Zhanna followed Dr. Labib's advice.

### MISSION: POSSIBLE

Surgery to remove the brainstem cavernous malformation was the best treatment option for Trent, but challenges abounded. Sitting at the base of the brain, the brainstem is difficult for neurosurgeons to access. Its roles in various vital functions mean any unintentional harm during surgery could be especially damaging.

"Few neurosurgeons will operate on the brainstem because of the inherent risks," Dr. Labib said.

Two factors worked in Trent's favor: his youth and Dr. Labib's specialized training. During the February 2022 surgery, Dr. Labib needed to reach Trent's brainstem while minimizing the effects of surgery on other parts of the brain. Instead of relying excessively on surgical instruments to move the cerebellum, a part of the brain that sits behind the brainstem, the team placed Trent in a sitting position for the surgery, which allowed gravity to shift the cerebellum and provide better access to the cavernous malformation.

After making an incision behind Trent's right ear, Dr. Labib used magnification to delicately navigate around key structures of the brain and reach the brainstem. Stains from the brainstem bleed and navigation confirmed he'd found the site of the cavernous malformation. Dr. Labib carefully opened a groove in the brainstem and removed the tangle of abnormal blood vessels.

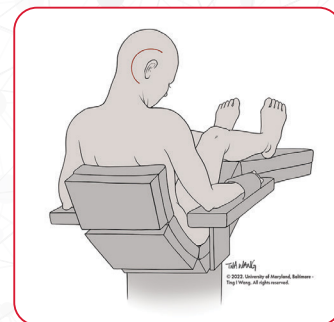
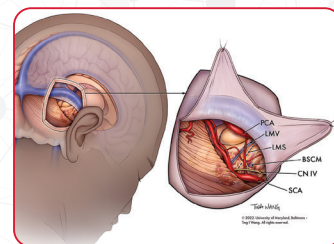
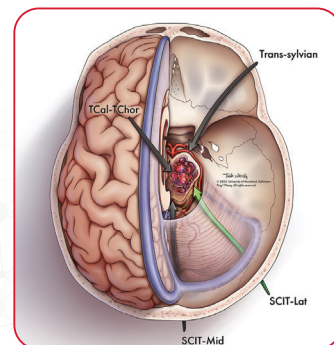
The threat of further damage was gone. Trent's tingling sensations and weakness vastly improved. Still, he faced a long road to recovery. His mother and surgeon were there for him every step of the way.

### UP TO THE CHALLENGE

The brainstem cavernous malformation had taken a toll on Trent's functional abilities. During the year after his surgery, he had to relearn some of life's most basic skills, from walking to opening jars. Right from the start, he refused to accept limits.

"I don't want to hear anyone tell me I might not be able to walk again," he recalled thinking when he was still in the hospital after the operation. "Everyone knew what had happened to me and didn't want to give me false hope, but Dr. Labib was confident he could fix me."

Throughout Trent's rehabilitation, through moments of despair and doubt, Dr. Labib offered encouragement and reassurance, and Zhanna provided unwavering support. Slowly, Trent achieved small victories. Strength and muscle mass returned. He was able to pour himself a bowl of cereal and fill his dog's water bowl.



He started walking again, and walking led, eventually, to running.

Having painstakingly regained his strength and mobility, and with his cognitive abilities unaffected, Trent is once again enjoying life in California—and not taking any part of it for granted. Both he and his mother are grateful for the surgeon who helped them through some of the most difficult moments of their lives.

“Dr. Labib was amazing,” Zhanna said. “He was there for me and my family, reachable and kind, and he explained everything. He’s a very, very good doctor and human being.”

## CAVERNOUS MALFORMATIONS

A cavernous malformation is a bundle of small blood vessels called capillaries that have become irregular and dilated. Capillaries, the body’s tiniest blood vessels, connect arteries and veins. Kasey Trent had a cavernous malformation in his brainstem, but these abnormal groups of blood vessels can form anywhere in the body. Here are three things to know about cavernous malformations:

- 1. Cavernous malformations in the brain and spinal cord are the most serious.** These are the ones most likely to produce symptoms. Cavernous malformations in the brain, called cerebral cavernous malformations, can cause seizures, bleeding, headaches and more.
- 2. Cerebral cavernous malformations can run in families.** Most people who develop these types of malformations don’t have a family history of the condition. Some, however, inherit genetic mutations that can cause cerebral cavernous malformations from their parents.
- 3. Surgery isn’t always necessary.** Some symptoms, such as seizures, are treatable with medications. Surgery may be appropriate for patients with worsening symptoms that can’t be controlled with medication, but patients and surgeons should weigh the risks and benefits of the procedure.

To learn more about how UMMC is leading the way in neurosurgery, visit [umm.edu/neurosurgery](http://umm.edu/neurosurgery) or call **410-328-6034** to schedule an appointment.

The UM Charles Regional Stroke Team poses for a picture in front of the hospital last August.



## AWARD WINNING STROKE PROGRAM EARNS 5-YEAR REDESIGNATION

LAST YEAR, UNIVERSITY OF MARYLAND CHARLES REGIONAL MEDICAL CENTER’S STROKE CENTER RECEIVED A FIVE-YEAR REDESIGNATION FROM THE MARYLAND INSTITUTE FOR EMERGENCY MEDICAL SERVICES SYSTEMS (MIEMSS).

**THE INSTITUTE FOUND** that UM Charles Regional maintains a strong commitment to its treatment of complex stroke patients as well as a robust community education program.

“The Stroke Center has made tremendous strides to improve an already strong stroke program,” said Shellee Stine, UM Charles Regional stroke team and clinical programs coordinator. “Working hand in hand with EMS has helped us provide improved stroke patient outcomes and experiences.”

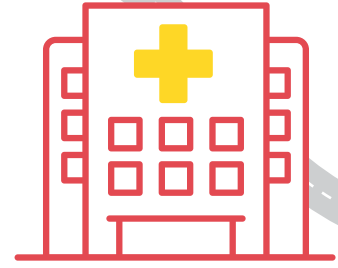
In their assessment of the Stroke Center, MIEMSS noted UM Charles Regional’s dedication of a stroke team coordinator to the overall stroke program as a way to improve the quality of care provided. Additionally, the institute was impressed by the strong working relationship with the Maryland EMS system.

The institute also complimented UM Charles Regional’s robust community stroke education program, creation of a stroke multidisciplinary quality improvement team and frequency of quality improvement meetings being conducted with University of Maryland Medical System stroke leaders.

UM Charles Regional’s stroke program also earned a 2023 Stroke Gold Plus award and Target: Stroke Honor Roll and Type 2 Diabetes Honor Roll-Stroke designations under the Get With The Guidelines program administered by the American Heart Association and the American Stroke Association.

To learn more about the Stroke Center, visit [umms.org/charles/health-services/stroke](http://umms.org/charles/health-services/stroke).

# Driven by SYMPTOMS



WONDERING  
WHERE TO TURN  
FOR MEDICAL  
ATTENTION? LET  
YOUR SYMPTOMS  
BE YOUR GUIDE.

**GOING TO THE** right place for medical care helps ensure you get the right care at the right time. If you can wait for an appointment, your primary care provider (PCP) is your first choice. After hours, consider an urgent care clinic. For life- or limb-threatening injuries, going to an emergency department (ED) or calling 911 connects you to the specialists you need to see. Here's where a few symptoms should take you:

## PCP/URGENT CARE

## EMERGENCY DEPT



### Chest Pain

Happens when eating certain foods, occurs only when lying down, feels sharp, lasts only a **few seconds**, and is not accompanied by shortness of breath, vomiting or sweating

Feels like **pressure or tightness in the chest**, is accompanied by shortness of breath, sweating or vomiting, and may radiate to the neck, back, shoulder(s) or jaw



### Falls

You're **younger than 65** and hit your head or suspect you broke a bone or sprained a ligament. Those **65 or older** who've hit their head should go to the ED.

Results in frequent vomiting, loss of consciousness, a **bad headache that medication can't help**, seizures, slurred speech, extreme pain or bone poking out of the skin



### Headaches

**Doesn't improve** with medication or makes sleep, work or daily activities difficult

Sudden and severe, and may be accompanied by confusion, difficulty speaking or walking, fever, **numbness on one side of the body**, or a stiff neck



If you need a primary care provider, visit [umms.org/find-a-doctor?si=charles](https://umms.org/find-a-doctor?si=charles).


# HOSPICE OR PALLIATIVE CARE?

LEARN MORE ABOUT DIFFERENT TYPES OF SERVICES AVAILABLE TO HELP PEOPLE WHEN THEY NEED IT MOST.

**KNOWING THE DIFFERENCES** between hospice and palliative services becomes increasingly important when caring for a loved one or personally experiencing pain and/or symptoms from a chronic or life-threatening illness.

**Palliative care**, also known as supportive care, is meant to improve quality of life for patients and family members and is available at any stage during treatment for a chronic, serious illness or condition. Compassionate **hospice care** begins when curative treatment ends and is meant to support patients and families as the end of life nears.



	PALLIATIVE OR SUPPORTIVE CARE	HOSPICE CARE
<b>What it does</b>	<ul style="list-style-type: none"> <li>Treats pain and illness</li> <li>Works alongside medical treatment to reduce symptoms of serious illnesses</li> </ul>	<ul style="list-style-type: none"> <li>Treats pain</li> <li>Mitigates symptoms in terminal illnesses</li> </ul>
<b>Who it's for</b>	<ul style="list-style-type: none"> <li>People with a serious or terminal illness who are expected to live longer than six months</li> </ul>	<ul style="list-style-type: none"> <li>People who are expected to pass away from a terminal illness within six months</li> </ul>
<b>What's involved</b>	<ul style="list-style-type: none"> <li>Pain management</li> <li>Treatment of symptoms</li> <li>Coordination of medical care</li> <li>Supportive assistance with insurance and logistics</li> <li>Help accessing community resources</li> <li>Spiritual care</li> </ul>	<ul style="list-style-type: none"> <li>Pain and symptom management</li> <li>Emotional support</li> <li>Grief counseling</li> <li>Medical supplies</li> <li>Spiritual care</li> <li>Inpatient care (for those who meet strict criteria)</li> <li>24/7 on-call support</li> </ul>
<b>Where the care takes place</b>	<ul style="list-style-type: none"> <li>People's homes</li> <li>Nursing homes</li> <li>Assisted living facilities</li> <li>Hospitals</li> <li>Skilled nursing facilities</li> <li>Outpatient clinics</li> <li>Anywhere else needed</li> </ul>	<ul style="list-style-type: none"> <li>Home</li> <li>Most types of residences or care facilities</li> <li>Specialized hospice facilities</li> </ul>
<b>Who's on the team</b>	<ul style="list-style-type: none"> <li>Palliative care physicians, physician associates, nurse practitioners</li> <li>Nurses</li> <li>Social workers</li> <li>Spiritual advisors</li> </ul>	<ul style="list-style-type: none"> <li>Physicians</li> <li>Nurse practitioners</li> <li>Physician associates</li> <li>Nurses</li> <li>Home health aides</li> <li>Social workers</li> <li>Spiritual advisors</li> <li>Volunteers</li> <li>Family caregivers</li> </ul>
<b>Which organizations provide care</b>	<ul style="list-style-type: none"> <li>Health care clinics</li> <li>Hospitals</li> <li>Licensed home health agencies</li> <li>Nursing facilities</li> <li>Palliative care practices</li> </ul>	<ul style="list-style-type: none"> <li>State licensed and/or Medicare-certified hospice providers</li> <li>U.S. Department of Veteran Affairs</li> </ul>
<b>Who pays</b>	<ul style="list-style-type: none"> <li>Medicare, Medicaid and private insurance usually cover much of the expense</li> </ul> 	<ul style="list-style-type: none"> <li>Medicare pays for hospice services except for room and board, although some medications or services may not be covered.</li> <li>Some patients may also find hospice covered by state Medicaid plans or private insurance.</li> </ul>
<b>How long it lasts</b>	<ul style="list-style-type: none"> <li>As long as needed</li> </ul>	<ul style="list-style-type: none"> <li>Six months or less, with certain extensions available</li> </ul>

## WHO MAY BENEFIT FROM PALLIATIVE CARE

Palliative care provides support and can improve quality of life for patients being treated for a range of serious conditions, including:

- ALS
- Alzheimer's and other forms of dementia
- Cancer
- Chronic obstructive pulmonary disease (COPD)
- Heart failure
- HIV/AIDS
- Huntington's disease
- Kidney disease
- Liver disease
- Multiple sclerosis (MS)
- Parkinson's disease
- Sickle cell anemia
- Stroke

To learn more about palliative care and hospice services available at University of Maryland Medical System, visit [umms.org/health-services/palliative-care](https://umms.org/health-services/palliative-care).

# FOUNDATION SUPPORTS HEALTH CARE MISSION THROUGH DONATIONS, FUNDRAISING EVENTS

**CHARLES REGIONAL MEDICAL** Center Foundation raises philanthropic funds to preserve and enhance the future of health care at University of Maryland Charles Regional Medical Center. Through the development of private and public investments, planned giving and volunteerism, the CRMC Foundation serves to assist the hospital in providing high-quality health care to Charles County residents.

In addition, the CRMC Foundation also hosts a variety of fundraising events throughout the year to help sustain critical health care services at the hospital. Please consider joining other Charles County community members and donors in supporting the Foundation's mission at one or more of these amazing events. We look forward to seeing you!

## 2024 FOUNDATION EVENTS

- **Gala:** April 6, Swan Point Yacht and Country Club
- **Honor Roll of Women:** May 9, UM Charles Regional
- **Golf Classic:** June 13, Swan Point Yacht and Country Club
- **Wine Tasting:**  
Sept. 7, Port Tobacco Courthouse grounds
- **Tree of Life:** Dec. 6, UM Charles Regional

Visit our website to learn more about the Gala and other upcoming events.



[www.umms.org/charles/giving](http://www.umms.org/charles/giving)

Funds raised by the CRMC Foundation through events and generous community member donations benefit projects and critical needs of the hospital. For questions about our cause or how to donate, please visit our website or contact the Foundation at **301-609-4132**.



UNIVERSITY OF MARYLAND CHARLES REGIONAL MEDICAL CENTER IS COMMITTED TO PROVIDING EQUITABLE CARE TO THE COMMUNITIES WE SERVE AND CELEBRATING THE VALUE OF A DIVERSE AND INCLUSIVE WORKFORCE.

**STACEY COOK, VICE** president for Human Resources and chair of the hospital's Equity, Diversity & Inclusion Council, said this means the hospital will foster a culture that promotes equity, diversity and inclusion in our hiring, recruitment and promotion policies; how we listen to and engage with our community; how we provide care to our community; and how we help our staff members achieve a healthy, sustainable work-life balance.

Those efforts are already taking root in the efforts of the Health Equity Challenge Committee led by Mary Hannah, vice president of Population Health. That committee, part of a larger effort throughout the University of Maryland Medical System to address health care disparities, is identifying ways to address higher rates of diabetes among African American citizens in Charles County, including modifying educational programs to be more culturally accessible to communities that have experienced disparities in access to care.

That effort has also expanded to include more hospital outreach programs. The Community Health Equity Advisory Council has begun meeting with community representatives to ensure that vital information, including about diabetes programs, stroke education and cardiovascular health, is reaching the communities where it is needed most.

"Our efforts to address disparities in health care access and outcomes are going to be holistic, comprehensive and ongoing," Hannah said. "Our goal is to create a better state of care for everyone in our community."

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**Charles Regional Medical Center**  
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