RYLANI HEALTH MATTER COVER STORY: STATE-OF-THE-ART MEDICAL SERVICES. **CLOSE TO HOME.** PAGE 6 WINTER 2021 **ACADEMIC MEDICINE** THE FIGHT OF HIS LIFE AT WORK University of Maryland Charles Regional Medical Center

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RECEIVING THE GIFT OF

LIFE THROUGH THE KIDNEY TRANSPLANT PROGRAM



STATE-OF-THE-ART MEDICAL SERVICES. CLOSE TO HOME.

One convenient location for a growing list of specialties



THE FIGHT
OF HIS LIFE
How one local man
battled COVID-19

ACADEMIC MEDICINE AT WORK

The Gift of Life— University of Maryland Medical Center kidney transplant program helps its own surgeon





NOEL A. CERVINO

President/Chief Executive Officer

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MESSAGE FROM THE CEO



UNDERSTANDING AND
ADAPTING to identified
health needs is vital to our
hospital and the patients
we serve. That's why we
continue to expand the
breadth and quality of
medical services we offer,
and in particular, those

related to the care and prevention of cancer.

In this month's cover story, we discuss the expanding level of services at our medical pavilion. We are proud of our new breast health services, an important advance for local medical care available to Southern Maryland women and men, under the leadership of Dr. Charity Dugan. For those suffering from lymphedema—a common complication for those who've had lymph nodes removed or damaged during surgery or cancer treatment—we now offer a new program at our Rehabilitation Center that helps treat and mitigate the impacts of this ailment. Soon we will be opening our new Endoscopy Center, which will help us continue to lead the fight against colorectal cancer. Combined with our Primary Care group and our imaging services, the pavilion is a one-stop shop for cancer screening and prevention services.

Also inside is the inspiring story of a COVID-19 patient whose recovery is representative of many patients we have helped over the course of the pandemic. Across our hospital, our staff and our departments have come together to deliver optimal and patient-centered care to address the needs of all our patients. It's care you can count on from your community hospital.

Noel A. Cervino
President & CEO

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The Fight of

ONE LOCAL MAN'S BATTLE **AGAINST COVID-19**



EARL WALKER KNEW something wasn't right. A fever had set in. Breathing had become more difficult. In mid-May the 55-year-old electrician took a COVID-19 test and soon learned he'd tested positive. Walker asked his wife, Valencia, to call an ambulance to take him to University of Maryland Charles Regional Medical Center. Upon admission, he was sent to the intensive care unit (ICU). He reacted positively to initial treatments and moved to a less critical unit after a few days.

Back at their Swan Point home and unable to visit him in the hospital, Valencia awaited daily updates. When he was moved from ICU, the nurse warned Valencia the positive news might not last. Sure enough, Walker's condition worsened.

THE ROAD BACK HOME

Back in the ICU, Walker lost consciousness and woke up days later to a ventilator, oxygen tank and feeding tube—and an interdisciplinary team ready to guide him back to health.

Physical therapist Melissa Zalesak worked on his rehabilitation.

"He was still a critical care patient, but he was awake, alert and able to receive therapy," Zalesak said.

Dependent on the machines for life-saving treatment, he needed medical guidance to relearn even the most basic task, starting with sitting up in his hospital bed. Once he could support himself in this position, Zalesak helped him through more challenging tasks, like standing and walking short distances.

"I kept trying to move around and build my strength up," Walker said.

As he recovered, he worked with speech and occupational therapists and other members of UM Charles Regional

inpatient rehabilitation team, which is part of the University of Marvland Rehabilitation Network.

FAMILY CONNECTIONS

With hospital visitation restricted, adapting to a virtual environment became a powerful tool. Video calls raised the spirits of the entire family and strengthened Walker's resolve during rehabilitation.

"It was very needed, very comforting for us as a family," Valencia said of the difficult situation heightened by Walker's isolation and the family's uncertainty. The outreach coordinated by Walker's medical team promoted a positive healing environment—even from afar.

After more than a month at the hospital, Walker returned home. However, like many others, he still struggles with

complications from the virus, which adds to his appreciation of the care he received.

"We're forever grateful for the staff for everything they did." Valencia said.

And the team at **UM Charles Regional** celebrates Walker's success.

"We've had so many wonderful recovery stories," Zalesak said. "We're very thankful for that."



The Walker family

Staying Sake

WHETHER YOUR CHILDREN ARE ATTENDING SCHOOL IN PHYSICAL OR VIRTUAL CLASSROOMS, YOU CAN HELP THEM STAY HEALTHY BY PROVIDING THEM WITH LUNCHES FILLED WITH NUTRIENT-RICH FOODS THAT BOOST THEIR IMMUNE SYSTEMS.

YOU CAN'T PROTECT your children from exposure to all illness-causing viruses. But you *can* lower their risk of becoming ill by teaching them healthy eating habits and providing the ingredients they need. Healthy people are better prepared to fight off and recover quickly from diseases. Swapping convenience foods for healthier lunches is one important way you can help your child stay safe and well.

"Parents should provide their kids with an assortment of beautiful and colorful fruits and vegetables," said Jamilah Bugayong, RDN, LDN, registered dietitian at University of Maryland Charles Regional Medical Center. "Foods that naturally come in a variety of colors contain the mix of nutrients and minerals bodies need to support the immune system."

For example, fruits rich in vitamin C, such as oranges, grapefruits and strawberries, can help the body produce more antibodies—proteins needed to destroy harmful bacteria. Vegetables high in vitamin A, such as carrots, broccoli and spinach, keep the body's skin and tissues healthy to protect against infections.

But how can you get your child on board with eating healthier foods? Carrots don't appear as delicious as cheese puffs, and a child may not want to replace candy with a fruit salad. Bugayong says involving children in the process of planning their own lunches may be the trick.

"Make choosing healthy foods fun, and take your kids to the grocery store with you when you feel safe doing so during the pandemic," says Bugayong. "Give your children some freedom to choose their own nutritious foods and they will be more excited about healthy eating."

BUILD A HEALTHY LUNCH

A balanced meal contains a mix of food groups. Fill your child's lunch with at least one serving from the following categories:

- **Vegetables**—carrots, cucumbers and mini sweet bell peppers
- Fruit—apples, oranges and strawberries
- **Grains**—quinoa, brown rice, whole-grain bread or crackers
- Protein sources—beans, chickpeas, lean meats (turkey, chicken, salmon) and tofu
- Fats—avocado, yogurt-based salad dressing, nut butter, walnuts, sunflower or pumpkin seeds
- Drinks—milk (low-fat, almond, soy, oat) and water

For example, one lunch might include turkey slices in a whole-wheat tortilla, cucumbers with hummus and apple slices. Another could be tofu salad in a whole-grain pita with cherry tomatoes and mini sweet bell peppers with avocado dip.



Are you looking for personalized guidance on healthy eating? Call **301-870-4100** to make an appointment with Jamilah Bugayong.





STATE-OF-THE-ART MEDICAL SERVICES. CLOSE TO HOME.

THE UNIVERSITY OF MARYLAND CHARLES REGIONAL MEDICAL PAVILION IS BECOMING A ONE-STOP DESTINATION FOR THE DIAGNOSIS. TREATMENT AND PREVENTION OF BREAST CANCER AND COLORECTAL CANCER. THANKS TO THE RECENT ADDITION OF SEVERAL NEW SERVICES.

OPEN SINCE 2018, the UM Charles Regional Medical Pavilion has long offered a variety of multispecialty services, allowing patients to save time and reduce travel by accessing important care in a single, convenient location. Easy to navigate and featuring ample parking, the medical pavilion is home to primary care and rehabilitation services. The facility also offers MRI, CT, ultrasound, bone densitometry, 3D mammography and X-rays at the Bill and Julie Dotson Imaging Center.

Last summer, the UM Charles Regional Medical Group began offering breast health services, including breast cancer rehabilitation and upper extremity lymphedema therapy, as part of UM Charles Regional Rehabilitation. Soon to come is a dedicated endoscopy center. Together, these new services are bringing hope, comfort and peace of mind to patients—and changing health care in Charles County and southern Maryland.

YOUR (NEW) HOME FOR BREAST HEALTH

In early August, the UM Charles Regional Medical Pavilion began welcoming patients to the UM Charles Regional Medical Group – Breast Health, led by board-certified general surgeon Charity Dugan, DO, FACOS. Specializing in breast surgery, Dr. Dugan joined UM Charles Regional Medical Group over the summer after more than three years at Womack Army Medical Center in North Carolina. She cares for women and men with breast cancer and benign breast conditions and is passionate about building relationships with her patients.

"During training, breast surgery appealed to me because it was a more personal form of surgery," Dr. Dugan said. "When I remove a patient's gallbladder, I typically don't see the patient again after their routine post-operative check up. With patients who have breast cancer, however, I see them annually, if not more frequently. I deliver the same level of personalization that patients expect from their primary care provider because I can identify with the choice these patients face between undergoing surgery to remove a portion of the breast or the entire breast."

At the UM Charles Regional Medical Pavilion, breast imaging services, including screening and diagnostic mammography and breast ultrasound, are just steps away from the Breast Health office. That allows Dr. Dugan to work closely with the radiologists and technicians—and increases convenience for patients by allowing them to walk next door for tests that can help diagnose cancer or determine its extent.

Dr. Dugan recommends that any individual with breast cancer or another breast condition, a personal history of breast cancer, or a hereditary predisposition to cancer should see a breast specialist at least yearly. Individuals interested in genetic testing—which can inform their approach to breast cancer prevention or treatment—can meet with a genetic counselor at the University of Maryland Marlene and Stewart Greenebaum Comprehensive Cancer Center via telemedicine to determine whether testing is right for them.

Typically, patients who have breast cancer meet with Dr. Dugan after receiving a diagnosis based on a biopsy. Most individuals are candidates for surgery to remove the tumor and a small part of the surrounding tissue (known as lumpectomy or breast conservation) or surgery to remove the whole breast (mastectomy). Dr. Dugan can refer patients to a University of Maryland Medical System plastic surgeon if patients want breast reconstruction after surgery.





"Our best assets are our therapists."

— SHARON KHOO, MS, CCC-SLP, MANAGER OF REHABILITATION SERVICES
AT UM CHARLES REGIONAL REHABILITATION

THE HEALTH RISKS OF PANDEMIC PROCRASTINATION

Have you canceled or delayed routine medical services out of reluctance to visit a health care facility or provider's office during the ongoing coronavirus pandemic? If so, you're not alone. Over the past few months. Charity Dugan, DO, FACOS, a board-certified general surgeon specializing in breast surgery with University of Maryland Charles Regional Medical Group, has seen patients skip screening mammograms or put off seeking care for appendix or gallbladder problems. Skipping or postponing health screenings or not following up about symptoms can have serious health consequences.

"Patients might put having a screening mammogram on the back burner if they had normal findings last year because they figure the same results are likely this year," Dr. Dugan said. "However, abnormalities show up all the time, which is why we recommend a screening mammogram every year. It's important to stay on schedule because we compare your most recent results to all of your past mammograms. When you delay diagnosis of breast cancer, you delay treatment, and when you delay treatment, your prognosis

UM Charles Regional Medical Center is taking a variety of steps to keep patients safe during the pandemic so they can feel comfortable receiving the care they need, whether virtually or in-person. If it's time for an important screening or appointment, don't put it off—for your health's sake.



"More than 90% of patients are candidates for lumpectomy or mastectomy," Dr. Dugan said. "We decide which is most appropriate based on the clinical stage of the cancer, including the size and location of the tumor and condition of the lymph nodes, which is a common place for cancer to spread. We may elect to try chemotherapy before surgery to see whether a tumor will shrink. Sometimes, patients respond so well that there's no longer evidence of a tumor on imaging after chemotherapy, but we'll still perform a lumpectomy to be on the safe side."

Dr. Dugan is excited about making a difference in patients' lives.

"I moved to Charles County to be the point person for breast cancer and overall breast health," Dr. Dugan said. "I'm here to help patients navigate their journey with breast cancer, whatever that means for them."

CARING FOR A COMMON COMPLICATION OF CANCER TREATMENT

For some patients who have breast cancer, treatment involves removal of lymph nodes in the underarms or radiation therapy that can damage them. Lymph nodes are small structures located throughout the body that filter lymph fluid, which carries waste products away from cells. Removal of or injury to lymph nodes can cause a condition called lymphedema.

"Lymphedema is an abnormal accumulation of fluid in the tissue, which can result in swelling of a body part and the replacement of normal tissue with scar tissue, a condition called fibrosis," said Sharon Khoo, MS, CCC-SLP, manager of

rehabilitation services at UM Charles Regional Rehabilitation, which is part of the University of Maryland Rehabilitation Network. "Lymphedema affects the region of the body in which lymph nodes were removed or damaged. In January, we began offering breast cancer rehabilitation and upper extremity lymphedema therapy at the UM Charles Regional Medical Pavilion. Therapy can help with lymphatic drainage using manual therapy techniques, compression therapy and an exercise program."

Therapy for lymphedema is the latest in a series of services that UM Charles Regional Rehabilitation has added at the UM Charles Regional Medical Pavilion since the facility opened. The rehab team started out offering physical therapy for patients with orthopaedic and sports injuries before adding physical therapy for pelvic health and occupational therapy for hand conditions.

UM Charles Regional Rehabilitation features a fully equipped therapy gym and a skilled team of therapists.

"Our best assets are our therapists," Khoo said. "All of them have advanced degrees in physical and occupational therapy, and two of our physical therapists have orthopaedic board certification from the American Board of Physical Therapy Specialties."

INSIDE LOOKS

The newest addition to the UM Charles Regional Medical Pavilion will be a 3,500-square-foot endoscopy center on the facility's second floor. The center, which is slated to open in mid- to late summer 2021, will feature two suites where gastroenterologists perform procedures using cameraequipped scopes to observe the interior of organs and other structures inside the body. In addition to the procedure rooms, the endoscopy center will include a waiting room, check-in area and six pre- and postoperative beds. Leadingedge equipment will capture high-quality video during procedures for wireless transmission to an in-room screen and allow for photos to be archived in patients' electronic

medical records.



"Having a dedicated endoscopy center will be more efficient because it will allow us to care for more patients than at the hospital," said Joseph Murphy, MD, gastroenterologist with UM Charles Regional Medical Group, "With a center and staff devoted to endoscopy. we will be able to deliver high-quality care and attract

outstanding gastroenterologists who wish to work in a state-of-the-art facility."

Dr. Murphy and his colleagues will perform several procedures at the endoscopy center, including:

• Colonoscopy. This procedure allows gastroenterologists to find and remove small growths called polyps in the rectum and colon that could become cancerous, as well as determine the cause of symptoms, such as bleeding and diarrhea. Think of colonoscopy as a two-for-one procedure. Unlike other cancer screenings, if the gastroenterologist finds a

- suspicious polyp, he or she can do something about it right away and potentially prevent colorectal cancer from developing by removing the growth.
- Hemorrhoid treatment. Using a procedure not widely available in southern Maryland, gastroenterologists can destroy hemorrhoids—small bumps in the anus or rectum caused by swollen veins—using heat generated by infrared light, which does not cause pain or bleeding.
- Upper endoscopy. Using an endoscope placed down the throat, gastroenterologists can see the esophagus, stomach and a portion of the small intestine. This allows them to discover the cause of digestive symptoms and diagnose a variety of conditions, such as esophagitis, stomach ulcers and gastritis.

"Developing this endoscopy center shows the commitment UM Charles Regional Medical Center makes to providing the latest medical technology in a comfortable, caring environment," Dr. Murphy said. "It also demonstrates that, increasingly, providers are caring for patients in outpatient settings like the UM Charles Regional Medical Pavilion. These types of facilities will play an important part in how people receive health care in the future."

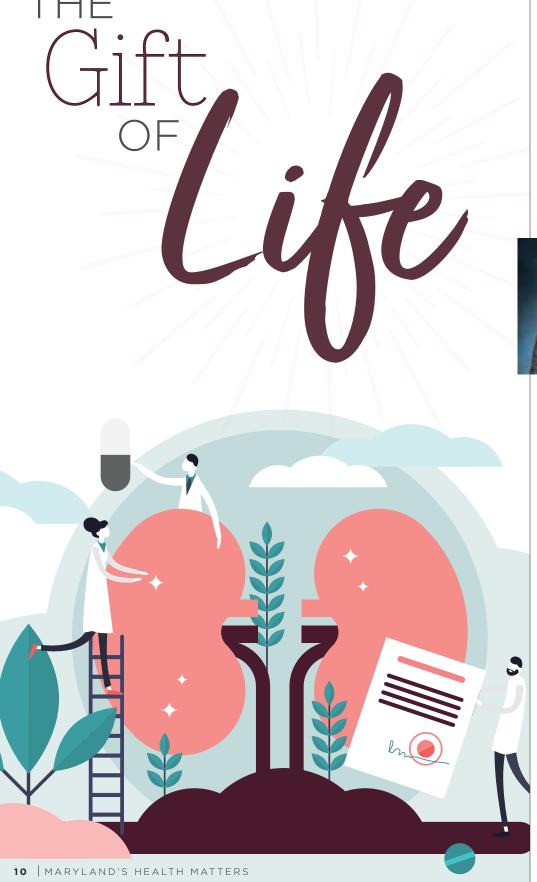


To learn more about the services the UM Charles Regional Medical Pavilion has to offer, visit umcharlesregional.org/pavilion.





ACADEMIC MEDICINE AT WORK



THE UNIVERSITY OF
MARYLAND MEDICAL
CENTER (UMMC) KIDNEY
TRANSPLANT PROGRAM
SEAMLESSLY BLENDS
COMPASSION, EXPERTISE
AND INNOVATION TO
PROVIDE A TRANSPLANT
SURGEON WITH A
KIDNEY OF HER OWN.



SILKE VERENA
NIEDERHAUS, MD,
clinical associate
professor of
surgery, made
up her mind
to become
a transplant
surgeon at age

11, after receiving her first kidney donation from a ninemonth-old deceased donor. Dr. Niederhaus is a member of the UMMC kidney transplant team. This multidisciplinary team is the largest in Maryland, consisting of expert surgeons, nephrologists, nurse coordinators, immunologists and others who specialize in this advanced type of care. Located in Baltimore, UMMC serves as the academic medical center for the University of Maryland Medical System and is uniquely positioned to provide the advanced, multidisciplinary care that kidney transplant surgery requires.

As part of this experienced team, Dr. Niederhaus provides a unique perspective as someone who has twice undergone transplant surgery herself.

Most recently, Dr. Niederhaus received a transplant using the UMMC paired kidney exchange.

Watch our video series about Dr. Niederhaus' compelling story at umm.edu/ journey.

"Our paired kidney exchange program activates when a donor is ready to give a kidney, but it isn't a good match with the recipient," explained Daniel Maluf, MD, FACS, director of the transplantation program and interim chief of the transplant surgery division at University of Maryland School of Medicine (UM SOM). "This program allows that donor to trade with another donor's recipient."

A good kidney donor match involves compatible blood typing, cross matching and antibody testing results that indicate the transplant is likely to be successful. Blood relatives are often good matches, but others may be as well.

"This program requires an advanced level of care and consideration." Dr. Maluf said. "Not all transplant centers provide this service. It's a complex procedure that requires a large group of donors to meet many recipients' needs. UMMC is able to participate in multiple paired kidney exchanges nationally, which helped Dr. Niederhaus meet her match for a living donor."

Continued on page 12

SCAR-FREE SURGERY

More than 2,000 living donors have changed the lives of patients through the University of Maryland Medical Center (UMMC) Transplant Center, but unless one of them told you, it's unlikely you would be able to tell they had surgery. UMMC is the first hospital in Maryland and third hospital in the country to use minimally invasive kidney



donation procedures that leave almost no scars on the donor's body.

This innovative surgery is called the single port technique, in which the surgical incision is placed inside the donor's navel. Also called laparoendoscopic single site (LESS) surgery, it involves expert surgeons' removing the donor's kidney through the single incision. Once healed, the incision is concealed within the navel, making the surgery virtually scar-free. In addition to the cosmetic benefits, patients also have fewer limitations in movement after this type of surgery, making it a safe and attractive option for living kidney donors.

While this form of kidney donor surgery is comparatively newer than multipleport laparoscopic surgeries, it has become the consistent standard of care at UMMC for the past several years. The transplant team conducts workshops to train other surgeons on this groundbreaking technique, and has written a chapter in the latest edition of the surgical textbook *Kidney Transplantation* explaining this technique's benefits. As knowledge about LESS surgery increases, UMMC remains one of the first and most experienced hospitals in America to perform it.

THE LIVING DONOR PROGRAM

100,000 **PEOPLE**

ARE CURRENTLY AWAITING A NEW KIDNEY.

AND THE AVERAGE WAIT TIME TO RECEIVE ONE FROM A DECEASED DONOR IS

THREE TO FIVE YEARS.

That is why one-third of kidney donations at University of Maryland Medical Center (UMMC) come from living donors.

"If you have a choice between a deceased or living donor, you choose the living donor," said Silke Verena Niederhaus, MD, clinical associate professor of surgery at UMMC. "A living donor is the only chance you have to get a kidney soon enough to stay off dialysis."

Dialysis is a procedure needed when normal kidney function is reduced to a fraction of what is required to clean the blood naturally. Dialysis involves multiple treatments that may take hours every week, along with dietary modifications and regular laboratory tests—often challenging but essential steps to prolong life.

WHO CAN BECOME A LIVING DONOR?

Most of our donors are related to the patients receiving their kidney, but not always. As long as your blood type is compatible with the patient's, it is possible you could become a living donor. Living donors must be at least 18 years old and in good general health. To ensure this, a donor surgeon performs a thorough evaluation of each living donor, as does a transplant nephrologist. Both physicians review physicals and test results to ensure each donor is healthy and will not be put at risk by donation. Donors at UMMC usually have a quick and excellent recovery with a 100% survival rate.

Want to give someone the gift of life? Call **410-328-5408** to speak to our experts about becoming a living donor.

LIVING & GIVING

Kidney donations can be given by deceased or living individuals, but waiting for a deceased kidney donation can take years. Living donations are essential to keeping patients alive and healthy, especially when waiting for a deceased donor could delay their much-needed care. Generally, patients who receive kidneys from living donors have higher long-term survival rates than those who receive kidneys from deceased donors. Living donors also provide patients with more options, as kidneys from unrelated living donors can be just as successful as those from blood relatives.

"Living donor kidneys can last longer and recipients do better, so that's what we aim for," said Nadiesda Almanzar Costa, MD, assistant professor of medicine at UM SOM and nephrologist at UMMC. "The exchange program is a great benefit when patients can't find a donor match on their own."

Dr. Niederhaus was part of the kidney exchange program. and eventually, her husband became her best match for a donor.

"My husband jokingly said the morning of his donor evaluation, 'Well, if I have cancer, you're going to figure this out by this afternoon," Dr. Niederhaus said. "Ironically, by lunchtime we found out he had a cancer in his right kidney."

THE SEARCH CONTINUES

Dr. Niederhaus' husband received a robotic partial nephrectomy, a delicate minimally invasive surgery that removes the cancerous tumor while preserving the healthy kidney, that has now resulted in his being cancer-free. However, on that fateful day, Dr. Niederhaus was still without a donor. In the end, Dr. Niederhaus' kidney exchange included eight different people. Four separate donors provided functioning kidneys to four individual patients, including Dr. Niederhaus, over the course of a week. Felicia Stolusky, who was unable to donate a kidney to her mother, became Dr. Niederhaus' living donor.

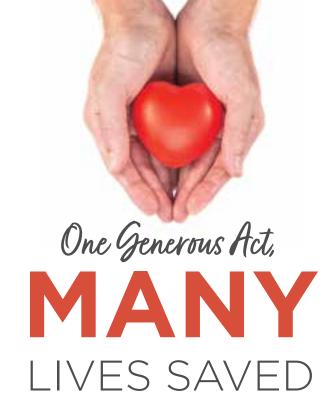
"I performed the surgery with another nephrology specialist." said Eugene J. Schweitzer. MD. professor of surgery at UM SOM and a transplant surgeon at UMMC. "It was incredible to see the donor kidney immediately functioning and to be a part of another successful kidney donor transplant."

Dr. Niederhaus was back on her feet the day of her surgery and returned to her office to review patient charts seven days later. To avoid any potential exposure to infection, she waited three months to resume performing surgeries.

"Dr. Niederhaus returned to her regular life right after her surgery," Dr. Costa said. "She's such an inspiration. I am in awe of what she can do. She's a great friend, an excellent physician and an amazing advocate for people with kidney disease."



To learn more about the UMMC kidney transplant program, call 410-328-5408 or visit umm.edu/transplant.



UNIVERSITY OF MARYLAND CHARLES REGIONAL MEDICAL CENTER RECOGNIZED FOR EFFORTS TO CONNECT DONORS WITH PATIENTS THEY CAN HELP.

The UM Charles Regional Medical Center received Platinum Recognition from the Workplace Partnership for Life (WPFL) for the hospital's efforts to increase the number of potential organ, eye and tissue donors. The WPFL is a national initiative, supported by the U.S. Department of Health and Human Services, Health Resources and Services Administration, to spread awareness and education about the importance of organ and tissue donation.

"Organ donation is so important," said Anne Weekley, vice president, Quality/Patient Experience. "It's estimated that as many as 20 people die every day from a lack of organs for transplant. Just one donor can save the lives of many others. Our hospital is proud to work with our community to ensure that as many people as possible can benefit from these selfless acts of generosity and love."



To learn more about organ donation and WPFL, visit donoralliance.org.

OVID-19 Immunity: hat You Need to Know

HOW VIRUSES WORK

To understand immunity, it is important to know how viruses work and how the immune system responds to them.

Viruses are pieces of genetic material surrounded by a protein coating. When viruses enter our bodies, they find a cell and inject it with their genetic material. This allows them to take control of the cell and multiply.

To battle this, the body's immune system must destroy infected cells. When the body first encounters a new viral infection, it deploys T cells, which find and kill infected cells. If the infection continues. the body then deploys B cells, which create antibodies that can better attack infected cells. Even after the infection has passed, antibodies remain in the body to help the body fight off future infection. This is called natural immunity.



It's important to get the COVID-19 vaccine even if you've recovered from the disease.

Natural immunity varies from person to person and for different diseases. It is still unknown how long natural immunity lasts for COVID-19.

Do you still need to wear a mask and social distance after getting the COVID-19 vaccine?

The vaccine will help to keep you from getting sick from the virus, but experts are still learning if the vaccine protects against the spread of the virus. Until we have more answers, it's important to continue to protect yourself and others through **COVID-19 prevention measures.**







Black Women's Health

UNDERSTANDING WHAT AFFECTS BLACK WOMEN DISPROPORTIONATELY AND HOW TO TURN THE TIDE

BLACK WOMEN ARE at increased risk for some serious and dangerous conditions, including COVID-19. In fact, the pandemic has put a spotlight on these health disparities. Why does this happen and what can be done to level the playing field?

UNDERSTANDING THE RISKS

Black women are enjoying a longer life expectancy today. However, this life expectancy still remains nearly four years less than their white female peers.

What is causing the discrepancy? According to the National Center for Chronic Disease Prevention and Health Promotion reported by the Centers for Disease Control and Prevention, researchers suspect it's because younger Black women are more likely to suffer from diseases that affect white women later in age. As you might suspect, living with a disease for many years wears down the body. This slow wearing results in earlier death.

It has been found that Black women are at greater risk for many conditions, including the following:

Kidnev disease

Stroke

Mental health disorders

- Cancer
- Diabetes
- Heart disease
- High blood pressure
- Infant mortality

SUPPORTING A CHANGE

Lowering the incidence of these diseases requires addressing the root causes of health disparities. Raising awareness of the overt and implicit bias affecting Black women throughout their lives is needed to address these forces in a meaningful wav.

One big step is enhancing provider-patient communication to ensure that everyone speaks the same language. Clear discussions about disease risks, symptoms, diagnosis, treatment and prevention empower every patient to expect—and ask for—equitable care. Involving or enhancing the role of community health workers and educators may help promote trust and communication.

In addition, research indicates that patients have better outcomes when treated by people with a similar appearance. Training and engaging more health care providers of color is an important part of improving care for diverse communities.

With these steps things can change, starting today.

To learn more about women's services at UM Charles Regional Medical Group - Women's Health, visit umms.org/charles/crmg/services/womens-health.

THE HEART OF THE MATTER

One of the most pressing health needs facing Black women is heart disease. According to the American Heart Association, by the age of 20, nearly half of all Black women will be living with a type of heart disease.

If you are a Black woman, take heart disease to heart. Talk with your physician today to find out if you're showing early signs or symptoms of heart disease.



Care You Can Count On

Providing the Outstanding Medical Care Charles County Deserves



HIGH-PERFORMING HOSPITAL

Recognized by US News and World Report

Awarded for Chronic Obstructive Pulmonary Disease Care



ACCREDITATION RENEWAL

Recognized by the Association of Diabetes Care & Education Specialists Awarded to UM Charles Regional



PLATINUM RECOGNITION

Recognized by the Workplace Partnership for Life

Awarded to UM Charles Regional Medical Center



BEST MATERNITY HOSPITAL

Recognized by Newsweek Awarded to UM Charles Regional Medical Center



EXCELLENCE IN CRITICAL CARE

Recognized by Healthgrades Awarded to UM Charles Regional Intensive Care Unit

Medical Center



QUALITY PROGRAMS

Recognized by the American Heart Association Awarded for Get With The Guidelines* Programs



PRIMARY STROKE CENTER

Recognized by the Maryland Institute for Emergency Medical Services Systems

Awarded to UM Charles Regional Medical Center

Center for Wound Healing



EXCELLENCE IN GASTROINTESTINAL CARE

Recognized by Healthgrades Awarded to UM Charles Regional Medical Group - Gastroenterology







EXCELLENCE IN PULMONARY CARE

Recognized by Healthgrades Awarded to UM Charles Regional Medical Center Pulmonary Rehabilitation

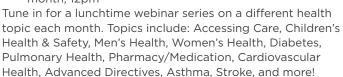


The University of Maryland Charles Regional Medical Center is here for you. We have had to change the way we do things during the coronavirus pandemic, so some of our events are being held virtually. For the latest information, check our online calendar at umms.org/ charles/community/classes-events.

LET'S TALK **ABOUT HEALTH**

A Community Conversation

 Third Wednesday of each month, 12pm



Learn more and register at umms.org/letstalk.



BRAIN INJURY & STROKE SUPPORT GROUP

University of Maryland Charles Regional Medical Center offers a FREE support group for survivors

of stroke or traumatic brain injury and their caregivers. The group meets on the first Monday of each month from 4-5pm. Each hour-long session consists of a variety of activities, education materials, guest speakers, guestion and answer period, and time for socializing.

If you have any questions or would like to attend a support group meeting, please call 301-609-4890 for specific meeting information.



PREDIABETES/TYPE 2 DIABETES SUPPORT GROUP FOR ADULTS

- Wednesday, March 24, 2-3pm
- Wednesday, May 26, 2-3pm

The Center for Diabetes Education sponsors a support group open to adults with diabetes or prediabetes and their loved ones. Meet others who are also on the journey with diabetes or prediabetes and get tips on how to balance life, food, activity and blood sugar.

For more information about how to join or to RSVP, call 301-609-5444 or email DiabetesCenter@umm.edu.



BIRTHING CENTER

Interested in attending a childbirth class or a breastfeeding support group or taking a tour of our newly renovated birthing center? Our

childbirth classes and maternity tours are offered on weekday evenings and weekends to accommodate varying schedules.

Preregistration is required. To register or learn more about our classes and activities, visit umms.org/charles/community/classes-events.



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END COVID & IT STARTS WITH YOU.

The COVID-19 vaccines are authorized by the FDA as safe and effective. Vaccination is the best tool for stopping the virus and helping us keep our communities safe.

Don't wait. Get the vaccine.

LEARN MORE: umms.org/vaccine

