The Skill to Rebuild & Restore
Expert care by UMMC trauma specialists saved a young woman's arm after a devastating accident. See page 10.

Headache Causes, Symptoms and Treatments
Page 4

Rehabilitative Care to Get You Up and Moving Again
Page 12

Cover Story:
Precision Eye Care Brings Better Vision
Page 6

Spotlight on University of Maryland Medical Center Midtown Campus

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Be a Part of Something Greater
IN THIS ISSUE

ADVANCED EYE CARE BRINGS BETTER HEALTH
The Friedenwald Eye Institute at University of Maryland Medical Center Midtown Campus treats everything from mild vision loss to severe disorders.

COVER STORY
ON THE COVER: Samuel D. Friedel, MD, clinical associate professor of ophthalmology at the University of Maryland School of Medicine.

HELP FOR SLEEP PROBLEMS
Disordered sleep can lead to other health issues.

THE SKILL TO REBUILD AND RESTORE
How University of Maryland Medical Center’s expertise in complex trauma care saved a young woman’s arm after a devastating accident.

DEPARTMENTS
3 A HEALTHY START
13 AT A GLANCE
14 NEWS AND EVENTS

Stay connected with UMMC Midtown Campus at umm.edu/midtown

We would like to hear from you
Please send us your comments, requests for more information or change of address to ummidtown@umm.edu; or University of Maryland Medical Center Midtown Campus, c/o Marketing, 827 Linden Ave., Baltimore, MD 21201; or call 410-225-8000.
Commitment and Community During COVID

COVID-19 has had an extraordinary impact on our community. Despite this, we’ve been inspired by the resilience we’ve seen during this time, ranging from our frontline staff to our community members. See how each and every person has played an active part in supporting the health and wellness of Baltimore City during the pandemic.

In recognition of the teamwork, compassion and unwavering commitment to our patients, community and each other, we are the “Home of the Brave.” Thank you to our health care workers for their bravery during this unprecedented time.

In honor of our COVID-19 survivors, Ribbon Trees have been created at both our Downtown and Midtown campuses. Each ribbon placed on the tree represents a patient discharged after battling COVID-19. We salute all of our COVID-19 survivors!

We are pleased to announce that the UMMC Midtown Campus has been awarded an ‘A’ in the spring 2020 Leapfrog Hospital Safety Grade, a national distinction recognizing the Midtown Campus’ achievements in providing safer health care, quality and safety. We congratulate our entire workforce at the front line, medical staff, trainees, and hospital leaders who support both campuses, who work so hard to earn this A.

Thank you to Under Armor for providing face masks and fanny packs for our hospital and other hospitals across the University of Maryland Medical System. These vital resources will help keep our staff safe as they fight on the front lines of this pandemic.

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University of Maryland Medical Center Downtown Campus and The University of Maryland Medical Center Midtown Campus were both selected by the Office of the Secretary of Defense to be featured for the military flyover in recognition of healthcare workers during “Healthcare Heroes Day”.

We are extremely honored to have been chosen for this recognition and grateful for the opportunity to have shared this experience.

Thank you to Under Armor for providing face masks and fanny packs for our hospital and other hospitals across the University of Maryland Medical System. These vital resources will help keep our staff safe as they fight on the front lines of this pandemic.

Honor Our COVID Heroes
Check out our new online message board to help us honor our doctors, nurses and staff for the life-changing work they are doing. Visit ummidtown.org/kudo.
**Headaches: Causes, Symptoms, Treatment**

Paul Dash, MD, assistant professor of neurology at the University of Maryland School of Medicine and headache specialist at the University of Maryland Medical Center Midtown Campus, answers a few questions about this common health complaint.

**WHAT ARE THE MOST COMMON TYPES OF HEADACHES?**

The most common are migraines, tension-type headaches and cluster headaches. Migraines usually involve sensitivity to light and noise, nausea and loss of appetite, and they can be disabling. They can last hours to days. Tension-type headaches are generally milder than migraines and don’t have the sensitivity to light and noise. Many patients with migraines also experience tension-type headaches. Cluster headaches, as the name implies, typically occur in clusters and often on a seasonal basis, and usually with a circadian pattern, happening at the same time daily.

**ARE CERTAIN GENETIC FACTORS OR BEHAVIORS LIKELY TO CAUSE HEADACHES?**

Stress, sleep disturbances and dietary factors are common migraine triggers. A family history of migraine is common in migraine patients, although specific genes for the common type of migraine have not been found. Cluster headaches are more often found in older male smokers, whereas females predominate in the migraine population.

**WHAT TREATMENT OPTIONS ARE AVAILABLE FOR HEADACHES?**

Lifestyle modifications like quitting smoking, reducing or eliminating alcohol consumption, following a consistent sleep schedule, exercising regularly, engaging in mindfulness and meditation activities, and reducing stress can limit the number and severity of headaches. Over-the-counter pain relievers can help treat occasional headaches, and prescription medications can be tried to both prevent headache in the first place and to treat headaches once they start. It is often a trial-and-error process to discover what works best.

Recently, new medications for migraine and cluster headache prevention, called CGRP inhibitors, have been excellent treatment options even for those patients who haven’t had success with other medications.

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**HELP FOR SLEEP PROBLEMS**

If you consistently have trouble falling asleep or staying asleep, or feel extremely tired during the day even if you had a full night’s sleep, you may have a sleep disorder. The most common types are:

- **Insomnia:** The inability to fall asleep or stay asleep
- **Sleep apnea:** Breathing interruptions characterized by periodic gasping or momentary suspension of breathing
- **Restless legs syndrome:** A “creeping” or tingling sensation in the legs
- **Narcolepsy:** Daytime sleepiness combined with sudden muscle weakness

“Disordered or abnormal sleep may contribute to major medical problems such as heart disease, stroke and high blood pressure. It can also take a psychological toll, robbing the joy of life from many people,” says Steven Scharf, MD, professor of medicine at the University of Maryland School of Medicine and medical director of the University of Maryland Sleep Disorders Center.

At the center, overnight and daytime sleep studies are conducted to help diagnose a wide range of problems.

**LEARN MORE**

For more information about the UM Sleep Disorders Center, visit ummidtown.org/sleep.

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**LEARN MORE**

For more information about neurology services on the UMMC Midtown Campus, visit ummidtown.org/neurology.
WHY STI RATES ARE SKYROCKETING

The Centers for Disease Control and Prevention says cases of three common sexually transmitted infections (STIs)—syphilis, gonorrhea and chlamydia—reached all-time highs in 2018.

Antibiotics can cure most STIs, but many people don’t have access to testing and treatment. Without treatment, STIs can spread, lead to infertility or ectopic pregnancy, and increase the risk of HIV infection. Syphilis passed from a mother to her baby can cause miscarriage or infant death.

The CDC cites several factors for the rising STI rates: less access to prevention and care for STIs because of poverty, stigma and drug use; reduced use of condoms; and state and local budget cuts that cause clinics to cut services.

“Some people may not have symptoms after contracting an STI, and many cases go undiagnosed, adding to further spread of the infection,” says Sarah A. Schmalzle, MD, assistant professor of medicine at the University of Maryland School of Medicine’s Institute of Human Virology and medical director of the Center for Infectious Diseases at the University of Maryland Medical Center.

You can reduce your risk of STIs and their complications by using latex condoms and having yourself and any sex partners tested frequently, and treated as necessary.

LEARN MORE

The UMMC Center for Infectious Diseases can diagnose and treat STIs and has special expertise and integrated services for people living with HIV and other viral infections. For more information, visit ummidtown.org/thrive.

Midwives Do More Than Deliver Babies

Many people think that midwives focus only on pregnancy and birth. However, many midwives in the U.S., including the certified nurse midwives (CNMs) at the University of Maryland Medical Center (UMMC), are qualified to care for women at all ages, stages and phases of life.

CNMs are registered nurses with advanced graduate education (master’s or doctorate level) in midwifery. They are independent health care providers, but they also work with other members of the health care team, such as physicians and nurses, to provide the highest-quality care.

The CNMs at UMMC have had an active practice for nearly 25 years and have extensive teaching experience and practical expertise. All our CNMs hold faculty appointments at the University of Maryland School of Medicine.

CNMs at UMMC provide prenatal care and deliver babies on the UMMC Downtown Campus, but many women also see midwives for other reasons:

- For annual well-woman visits
- To start or change their method of birth control
- To get tested or get prescriptions for sexually transmitted infections, urinary tract infections or other gynecologic infections
- For help with problems with their menstrual cycle and for other women’s health services

Most health insurance plans cover visits to CNMs.

LEARN MORE

For more information, visit ummidtown.org/womenshealth.
2020: THE YEAR OF PERFECTED VISION

ROUTINE EYE EXAMS ARE CRITICAL FOR HEALTHY EYESIGHT AND OVERALL HEALTH

You may have heard the phrase “the eyes are the windows to your soul.” This may or may not be true, but your eyes can definitely serve as a window to your overall health. Having your eyes thoroughly examined is a lot more than just getting a prescription for new glasses or contact lenses. Through routine eye exams, even more information can be discovered about your health. When it’s time to “get your eyes checked,” make sure you are seeing the right eye care professional for your needs.

The Friedenwald Eye Institute at University of Maryland Medical Center Midtown Campus provides comprehensive evaluation, diagnosis and treatment of general and subspecialty eye disorders through a multidisciplinary approach. The Institute brings together at one location board-certified ophthalmologists and optometrists to handle cases from mild vision loss to the treatment of severe disorders, such as diabetic eye disease and glaucoma.

OPTICIANS, OPTOMETRISTS AND OPHTHALMOLOGISTS

Opticians fit and adjust frames and other optical aids. Optometrists
Perform eye exams and vision tests, prescribe and dispense corrective lenses, detect certain eye abnormalities and prescribe medications for certain eye diseases. Ophthalmologists are medical doctors (MDs). An ophthalmologist is trained and licensed to practice both medicine and surgery. An ophthalmologist diagnoses and treats all eye diseases, performs eye surgery and prescribes eyeglasses and contact lenses to correct vision problems.

While ophthalmologists are trained to care for all eye problems and conditions, some specialize in a specific area of medical or surgical eye care. This is called a subspecialty. Subspecialties may include areas such as glaucoma, retinas, corneas, pediatrics, neurology and plastic surgery, as well as others. This added training and knowledge allows ophthalmologists to take care of more complex eye conditions.

The University of Maryland’s optometrists and board-certified ophthalmologists have been providing advanced eye care and training the next generation of eye doctors since the 1800s. In partnership with the University of Maryland School of Medicine, the ophthalmologists are also actively involved in scientific research determining the causes and finding cures for eye diseases and vision disorders.

**THE EYES HAVE IT**

Your eyes reveal a lot about your overall well-being. Many factors can affect your eyesight, including other health problems such as high blood pressure and diabetes. Eye diseases can appear at any time. Very often, they are unnoticeable at first and are difficult to detect. The medical

> Visit ummidtown.org/ophthalmology to learn more about eye health.
conditions listed below are just a few of the many disorders that an eye doctor can diagnose, and they should give you even more reason to schedule regular dilated eye examinations.

**Blurred Vision**
Blurred or unclear vision may be a sign of diabetes. If the disease isn’t controlled well, it may further result in diabetic retinopathy, a condition in which tiny blood vessels in your eyes leak fluids and blood. Diabetic retinopathy usually affects both eyes. Patients with diabetes who can control their blood sugar levels will slow the onset of diabetic retinopathy. The longer a person has diabetes, the more likely he or she is to develop diabetic retinopathy. If left untreated, diabetic retinopathy can cause blindness.

The Friedenwald Eye Institute collaborates with the University of Maryland Center for Diabetes and Endocrinology to offer the latest diagnostic and therapeutic regimens for diabetic eye disease. Early stages warrant regular follow-ups, examinations and testing as appropriate. Later stages of the disease require medication injections and laser treatment. More advanced stages may require surgical procedures in the operating room.

Blurred vision is also a symptom of age-related macular degeneration, or AMD. AMD blurs the sharp, central vision you need for straight-ahead activities such as reading, sewing and driving. AMD affects the macula, the part of the eye that allows you to see fine detail.

“Dry macular degeneration, the most common type, progresses very slowly and has no specific treatment,” says Samuel D. Friedel, MD, clinical associate professor of ophthalmology at the UM School of Medicine. “There are some combinations of vitamins and minerals that may slow the progression of the disease in some individuals. We are likely to see some breakthroughs in the next few years. Fortunately, specific treatments are now available for ‘wet AMD’ caused by abnormal vessel growth in the eye. These new treatments are sight-saving.”

Sudden instances of blurred vision or abrupt loss of vision may be an early sign of other diseases in the body. For instance, sudden loss and then return to near-normal vision might be an early warning sign of a migraine or stroke. Immediate medical attention in such cases may prevent serious damage to your health.

**Cloudy Vision, Difficulty Reading or Glare from Lights**
These symptoms may be from cataracts. A cataract is a clouding of the natural focusing lens of the eye, which progresses as we age. If you are age 60 or older, you should have a comprehensive dilated eye exam at least once every two years. Decreased vision from cataracts can be improved with new eyeglasses, brighter lighting or, in more advanced cases, outpatient surgery.

Cataract surgery is performed using minimally invasive surgical techniques for a faster recovery. “Our state-of-the-art operating suites enhance our ability to perform the most sophisticated eye surgery. The minimally invasive approach allows patients to leave shortly after their surgery and resume most activities the following day,” Dr. Friedel says.

**Dry Eye**
Various factors are responsible for causing dry eyes—hormonal changes, the environment or extended time spent staring at digital screens. More serious problems such as thyroid disease can cause dry eyes. Both hyperthyroidism
and hypothyroidism can lead to eye disease. Some symptoms include eyelid changes, bulging of the eyes, double vision, and dry eye problems including exposure of the cornea.

Dry eye is also the most common eye problem associated with rheumatoid arthritis, which can be severe, and is related to insufficient tears, or inflammation or loss of the tear-producing glands.

In addition, patients with rheumatoid or other autoimmune disorders can have inflammation inside the eye that may result in reduced vision, pain and redness of the eyes.

Adults and children are using computers, smartphones, tablets, TVs, video games and other gadgets on a daily basis. Staring at backlit LED screens, especially at night, has a negative effect on eye comfort and can lead to digital eyestrain resulting in dry eye.

Night Blindness
If you have difficulty seeing clearly at night, you may be suffering from a varying degree of night blindness. This may be a sign of poor vision, which can be corrected with prescription glasses, but it can also be a sign of cataracts or more severe eye disease. The cause can only be determined with a complete evaluation.

Glaucoma
Glaucoma is a condition in which the patient’s eye pressure (a measure of the fluid pressure in the eyes) is too high, which over time can destroy the nerve in the eye, leading to permanent blindness. There are no symptoms early in the disease, so regular eye examinations are a must for anyone with a family history of glaucoma or blindness. With early diagnosis, it is a very treatable disease. Generally just daily eyedrops are needed. In more advanced cases, laser treatment or surgery may be needed.

Yellow Eyes
If the white part of the eye, known as the sclera, looks yellowish, it can suggest jaundice. Jaundice is a symptom of liver problems caused by increased levels of bilirubin produced by your liver when it is damaged. Chronic alcohol abuse, infection, cancer and improper dietary habits are some of the common reasons for liver damage.

Ophthalmologists can help you determine more about your physical well-being than just the right prescription glasses or contacts. Most symptoms that affect your eyes and physical health may be visible to you, but some can only be identified by an eye doctor. The American Academy of Ophthalmology recommends an eye disease screening exam at age 40 for adults who do not have any signs or risk factors for eye disease. At the Friedenwald Eye Institute, most patients can be seen the same day for annual eye exams, emergency visits and consultations.

LEARN MORE
For more information, visit ummidtown.org/ophthalmology.
A serious ATV accident left Danielle Greenstein at risk of losing her arm, but the expert care she received at the University of Maryland Medical Center enabled her to regain almost full range of motion in her arm and hand.

For Danielle Greenstein, what should have been a fun-filled vacation at Deep Creek Lake in September 2018 quickly turned into a dramatic fight for survival.

Danielle, then 15, was driving a large ATV off-road with a friend when she made a sharp turn to avoid a tree. The ATV flipped over, sending her arm flinging backward outside of the vehicle’s roll cage and dragging beneath the vehicle.

When the ATV stopped on its side, she looked down. Her lower left arm had been crushed between the roll cage bars and the ground. “My arm was basically gone,” Danielle recalls.

Her friend was unharmed and ran to the nearest road in search of help and called 911, while Danielle tried to keep her arm intact. “I held myself up off the ground for about 15 minutes with my other arm. If I let go, my body weight would have crushed it even more,” Danielle says.

Once help arrived, Danielle took an ambulance to the nearest hospital that could stabilize her, which was in West Virginia. Doctors there feared that they might need to amputate her arm.

Danielle’s family, from Baltimore, quickly realized that because of the severity of her injury, she would need to be treated by experts in trauma care. So they had her
Danielle was transferred to the R Adams Cowley Shock Trauma Center at the University of Maryland Medical Center (UMMC).

**A PATH FOR RECONSTRUCTION**
Danielle was stable when she arrived at UMMC, but her arm was still in a bad state.

“She had a fist-sized wound. You could basically see through her arm, and there was still evidence of leaves, dirt, twigs and other debris in the wound. Some muscle tissue was dead or dying,” says Raymond Pensy, MD, an associate professor of orthopaedics at the University of Maryland School of Medicine (UMSOM) and a board-certified hand and upper extremity surgeon at UMMC and UM Orthopaedics.

The first step in preserving Danielle’s arm was to perform multiple debridements, a procedure that removes dead tissue and debris from the wound, while identifying nerves, arteries and other structures that remain intact. Though the first hospital had done some cleaning, it hadn’t been thorough. “When a wound isn’t sufficiently cleaned, it’s the perfect environment for bacterial growth and infection,” Dr. Pensy says.

In Danielle’s case, expert-level debridement was essential not only for preventing infection but also for developing a thoughtful plan to preserve her arm. “This was a highly specialized procedure. Usually, surgeons who treat cases as severe as Danielle’s are well versed in handling massive, wartime-type wounds. UMMC has the expertise required to handle these complex injuries,” Dr. Pensy says.

**RE-CREATING WHAT WAS LOST**
Dr. Pensy and his team discovered roughly four inches of dead bone that would need to be replaced, along with skin and muscle. Luckily, the major arteries and nerves of Danielle’s arm remained intact, providing a foundation for rebuilding.

The team first installed an antibiotic-loaded cement spacer, a bacteria-resistant replacement for the lost area of bone. Then they replaced the dead skin and muscle using a microvascular free tissue transfer, a surgery where tissues are taken from one part of the body and placed in another location. In Danielle’s case, her thigh donated the new tissues for her arm.

“A microvascular free tissue transfer involves hooking up arteries and veins that are sometimes smaller than pencil lead. It ensures that the relocated tissue can still have a blood supply and stay alive,” Dr. Pensy says. This complex surgery can successfully rebuild areas affected by traumatic injuries, but it’s not free of complications.

**Diligent Observation**
After the microvascular free tissue transfer, Danielle was monitored hourly. If a blood clot forms or the arteries constrict, the new tissues can lose blood flow and die. Having the right kind of observation and nursing care after surgery is essential.

“UMMC treats the most patients for limb-salvaging microvascular tissue transfers in the state. Our nurses have the experience needed to monitor patients closely and quickly identify signs of complication,” Dr. Pensy says. Most other hospitals don’t train their nurses to monitor microvascular surgery patients hourly.

A few days after surgery, Danielle’s fingers showed discoloration. Dr. Pensy found that two of her major arteries had constricted, reducing blood flow to dangerously low levels. She was at risk of losing her fingers.

Dr. Pensy and Jonathan Morrison, MD, an assistant professor of surgery at UMSOM and a vascular surgeon at UMMC, swiftly performed emergency angioplasties to unblock the arteries and successfully restored blood flow to Danielle’s fingers.

“I was so scared, but when I found out that they saved my fingers, I was overjoyed,” Danielle says.

**Making a Comeback**
The series of surgeries Danielle underwent kept her in the hospital for four weeks. Luckily, she had a lot of support along the way. “My family and friends would come to visit me every day. I also got close to all of the doctors. It felt homey,” she says.

Through all the procedures, Doug and Jody Greenstein, Danielle’s family, from West Virginia. Doctors there had her to be treated by experts in trauma care. So they had her to the nearest hospital that could stabilize her, which was in her to regain arm, but the expert at the University of Maryland Medical Center enabled Danielle Greenstein, then 15, to amputate her arm.

Danielle’s arm had been on its side, she looked down. “My arm was basically gone,” Danielle recalls. “My body weight would have crushed it even more,” she says. “If I let go, my other arm. If I let go, I found out that they saved my fingers, I was overjoyed,” Danielle says.

Danielle was 18 months old when she was公社 to Deep Creek Lake for a vacation at Deep Creek Lake. Danielle’s family, from Doug and Jody Greenstein, in search of help and called 911, while Danielle tried to roll cage and dragging a sharp turn to avoid a tree.

Her lower left arm had been for survival. Danielle says. “I held my other arm. If I let go, my other arm. If I let go, my other arm. If I let go, my other arm.

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I don’t think I would have had the same recovery with any other team caring for me,” says Danielle, with her parents, Doug and Jody Greenstein.
Danielle’s parents, never left her side. The couple took turns sleeping in a chair at her bedside.

After being released from the hospital, Danielle began her recovery. She spent the next month at home in bed, her arm elevated and attached to an IV. She received infused antibiotics four times a day.

While she required a few follow-up surgeries for a bone graft in her hip, much of her time was spent on rehabilitation efforts. Three days a week, she went to occupational therapy at UM Orthopaedics at Camden Yards.

When Danielle and her family had questions about her recovery outside of doctor visits, they could always rely on Dr. Pensy for guidance.

“Dr. Pensy was the best doctor I’ve ever had. We could shoot him an email, and he would respond almost instantly. He puts his patients before anyone,” Danielle says.

Danielle, who has always loved playing sports, has regained almost full range of motion in her arm and hand. Although she can no longer play competitive sports, she can perform most daily activities. She has even returned to working out with a trainer at her gym and performing activities that require some arm strength, such as kayaking.

Danielle’s awe-inspiring recovery is the result of hard work, a positive attitude and the first-class care she received at UMMC.

“I don’t think I would have had the same recovery with any other team caring for me. If I had stayed at the other hospital, I might have lost my arm. Now, I’m easing back into doing things I love,” Danielle says.

The University of Maryland Rehabilitation Network (UM Rehab) at the University of Maryland Medical Center Midtown Campus is a regional leader in comprehensive inpatient and outpatient therapy services. In coordination with the UMMC Downtown Campus, UM Rehab offers a full range of on-site rehabilitation services. Providers work together to assist patients in recovering from illness or injury, such as stroke, joint replacement or traumatic injury. Services include:

**Physical Therapy**
- Spine rehabilitation: Therapy to strengthen core muscles and improve flexibility after injury or surgery
- Orthopaedics: Pre-joint replacement therapy and post-operative therapy for fractures, joint replacements, sports and recreational injuries, and other conditions
- Pain management
- Treatment to improve mobility and strength
- Therapy to maximize movement and function after stroke and for multiple sclerosis and other conditions

**Occupational Therapy**
- Evaluation and treatment for common hand, wrist, elbow and shoulder injuries and conditions
- Splints to protect and correct hand, elbow and shoulder problems and disabilities
- Cognitive treatment to improve daily living skills with the use of strategies and introduction to adaptive equipment
- Evaluation of workplaces and job tasks to minimize repetitive stress injuries

Whether you have experienced a sports injury or workplace injury; had knee, shoulder or hip replacement; or are recovering from a life-changing event, the experts at the UM Rehabilitation Network provide every level of physical therapy and rehabilitative care to get you up, moving and living the most functional life possible.

**MAKE AN APPOINTMENT**
To schedule an in-person or virtual consultation with our hand and upper extremity surgeons, call 410-448-6400 or visit umortho.org.

**LEARN MORE**
Visit ummidtown.org/rehab to learn more about the UM Rehabilitation Network at UMMC Midtown Campus.
Summer brings ample opportunities for kids and adults to have warm-weather fun in the great outdoors. But it’s also important to stay safe and healthy while taking part in your favorite activities. Follow these tips to ensure you and your family get the most out of the season.

1. Avoid Sunburn
Reduce your risk of skin cancer by putting on sunscreen at least 15 minutes before going outside, and reapply every two hours. Wearing a hat, sunglasses and loose-fitting clothing offers further sun protection.

2. Fend Off Bugs
Mosquitoes and ticks are not only annoying, they can also carry disease. Use insect repellent on exposed skin. Check for ticks after spending time outside in grassy or wooded areas.

3. Stay Hydrated
Adequate hydration is essential. Bring water along whenever you go out. Avoid alcohol and sugary, caffeinated energy drinks that make you more dehydrated.

4. Eat Food Safely
At picnics and cookouts, keep raw meat, poultry and seafood in a separate cooler away from salads and fruit. Be sure to cook food thoroughly.

5. Practice Pool and Beach Smarts
Children and adults should not swim alone. Pay attention at all times when children are in the water. Young children, inexperienced swimmers and all passengers on boats should wear life jackets. At the beach, swim only in areas with a lifeguard.

DID YOU KNOW?

- **Ultraviolet rays** from the sun can harm your skin in just 15 minutes.
- **Foodborne illnesses** increase during summer because bacteria multiply faster when it’s warm out.
- **Signs of dehydration** in adults include extreme thirst, fatigue, confusion and dizziness. In infants and children, look for dry or cracked lips, fewer wet diapers and low energy levels.

**Sources:** American Red Cross, Centers for Disease Control and Prevention, Environmental Protection Agency, Food and Drug Administration, National Institutes of Health
**NEWS AND EVENTS**

**UPDATE**

Because of COVID-19 precautions, all on-campus support groups, information sessions and classes have been canceled for the time being. Please call 800-492-5538 for any exceptions and more information. As always, the health and safety of our patients, visitors and community remains our priority.

**STEPPING ON FALL PREVENTION: FREE 7-WEEK WORKSHOPS**

One in 4 people ages 65 and older have a fall each year. Stepping On is an evidence-based fall prevention program designed to help older adults take control of their risk, explore coping behaviors and encourage follow-through of safety strategies in everyday life. The program consists of small group sessions for seven consecutive weeks focusing on building and maintaining physical strength, learning what increases your risk of falls, and learning how to avoid them, resulting in an individualized action plan to stay on your feet and live life the way that you want.

A light lunch will be served, and free parking is available. Join us for an upcoming session.

For dates and to sign up for a class, call Mariellen Synan at 410-328-8402 or email her at msynan@umm.edu.

**THANKSGIVING DRIVE**

UMMC organized a Thanksgiving Food Drive to benefit those in need in our West Baltimore community. A total of 1,100 people from 274 households—including our five partnership schools, community organizations and clinics—received Heart-Healthy Holiday Baskets for Thanksgiving. Each basket included a holiday turkey and cooking instructions, canned goods and nutritious holiday recipes.

A special thank-you to all who participated in the Thanksgiving Food Drive. We are grateful for your giving spirit, which gave local families access to a traditional-style meal that they may not have been able to afford this holiday season.

**COAT DRIVE**

Thank you to everyone who participated in our Holiday Coat Drive! In just one month, we raised nearly $1,780 in online donations for more than 100 students attending Robert W. Coleman and Matthew A. Henson elementary schools. For some families, a new coat is a luxury that they may not be able to afford. But thanks to your generous donations, our campus has equipped students with the basic winter essentials needed to conquer harsh weather conditions.

**MLK ACTS OF SERVICE WEEK**

In celebration of Dr. Martin Luther King Jr., all UMMC employees were encouraged to pay it forward during the week of Jan. 20 by participating in service projects or by committing random acts of kindness that have a positive impact on our communities. Nearly 75 employees participated in more than a dozen projects at local schools, community centers and other venues.
NEW HEALTH EDUCATIONAL WEBINAR SERIES LAUNCHING THIS SUMMER

Taking care of your health is an important part of everyday life. Being knowledgeable about health can prevent problems and knowing how to find, understand and use health information and services can help you better manage unexpected situations when they occur.

Join us each month as we offer a 30-minute lunchtime presentation on a specific health topic such as diabetes, asthma, advanced directives and cancer. Our clinical experts will use the Ask Me 3® approach that encourages patients and families to ask three specific questions of their health care providers to better understand health conditions and what is needed to stay healthy.

- What is my main problem?
- What do I need to do?
- Why is this important for me to do this?

Visit www.umms.org/community for more information and to register for an upcoming webinar.

THE RED CROSS NEEDS YOUR HELP

To help the Red Cross overcome a severe blood shortage, University of Maryland Medical Center will host blood drives in the coming months.

You can sign up today by going to redcrossblood.org and typing in the sponsor code: UMMS.

THE TIME TO GIVE BLOOD IS NOW

Subscribe today for a better tomorrow

Receive the latest health and wellness tips via email.

Delivered straight from our expert physicians right to your inbox.
NOT JUST OUR DUTY but our life’s work

We are on the front line with you – all 28,000 employees in our medical system – with an unwavering commitment to your health and well-being. But we are bigger than that, because protecting the health of Maryland is a team effort. During these unprecedented times it takes everyone, across all industries in our state, to tackle the challenge before us. Each day brings uncertainty to us all. We can do this together.