

MARYLAND'S

HEALTH MATTERS

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FROM REGIONAL
EXPERT
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ST. JOSEPH MEDICAL CENTER



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Welcoming the return of top-rated spine surgeon, P. Justin Tortolani, MD



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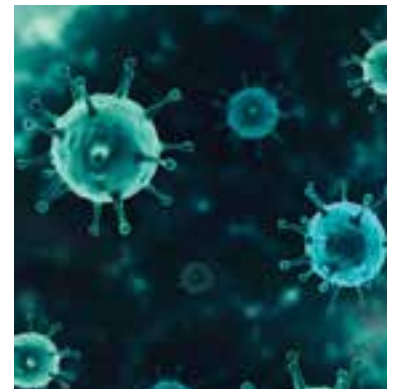
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Please send us your comments, information requests, change of address or opt-out requests to:
umsjmatters@umm.edu; 7601 Osler Drive, Jordan Center, Suite 158, Towson, MD 21204; or call **410-337-1700**.

CORRECTION: In the Spring 2020 issue of *Maryland's Health Matters*, "The Skill to Rebuild and Restore" incorrectly named the University of Maryland Orthopaedics at Camden Yards part of the University of Maryland Rehabilitation Network.

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

AMONG THE *Best*

U.S. NEWS & WORLD REPORT “BEST HOSPITALS” ONCE AGAIN NAMES UNIVERSITY OF MARYLAND ST. JOSEPH MEDICAL CENTER THE NO. 1 COMMUNITY HOSPITAL IN MARYLAND.

FOR THE SECOND year in a row, UM St. Joseph Medical Center has been ranked third in both the state and the Baltimore Metro area, making it the top-rated community hospital in Maryland.

“This accomplishment speaks to our relentless commitment to providing high-quality, safe and effective patient care,” said Thomas B. Smyth, MD, president and CEO of UM St. Joseph Medical Center. “This milestone recognition is the culmination of our ongoing work to standardize clinical excellence for optimal patient outcomes. We are most proud of our designation as the highest-ranking community hospital in Maryland because of what it means to our patients: unrivaled, leading-edge, compassionate care in a community-based setting.”

UM SJMC was also recognized as “High Performing” in nine highly specialized procedures and treatments: abdominal aortic aneurysm repair, aortic valve surgery, chronic obstructive pulmonary disease, colon cancer surgery, heart bypass surgery, heart failure, hip replacement, knee replacement and lung cancer surgery.

The annual Best Hospitals rankings, now in their 31st year, are designed to assist patients and their doctors in making informed decisions about where to receive care for challenging health conditions or for common elective procedures.



Speak Up for **EXCEPTIONAL CARE**

VOLUNTEERS PROVIDE INPUT TO
IMPROVE PATIENT CARE.

THE PATIENT AND Family Advisory Council (PFAC) at University of Maryland St. Joseph Medical Center is a team of patient and family member volunteers and hospital staff dedicated to incorporating patient and family perspectives into how we deliver care.

“Our patients’ and family members’ input helps us understand how to improve care and enhance overall experiences at UM St. Joseph,” said Vice President of Patient Experience Brenda Johnson. “We’re dedicated to ‘raising their voices’—using their feedback and suggestions—to create the perfect patient experience.”

PFAC council members meet monthly to work on initiatives to improve safety, quality and the patient experience. They offer insights and creative ideas to drive improvement, address issues and possible solutions, and, perhaps most importantly, listen openheartedly and respectfully to everyone’s feedback.

GETTING RESULTS

Notable recent accomplishments include updates to the hospital’s *Patient and Family Information Guide* and Emergency Department waiting room renovations.

“We’re so grateful to our PFAC members,” said Johnson. “Their partnership makes it possible for us to offer care in keeping with our mission of loving service and compassionate care.”

The Patient and Family Advisory Council is always looking for new members.

“New voices are always welcome,” said Johnson. “The more we hear from our patients and their loved ones, the better informed we are about offering the best care experiences possible for everyone.”



To learn more about PFAC at UM St. Joseph, please contact our Patient Experience office at **410-337-1962** or email **leigh.demont@umm.edu**.



Grateful patient Linda Yaffe credits Dr. Tortolani's quick action in preserving her ability to walk.

We Have Your **BACK!**

WELCOME BACK TO SPINE SURGEON P. JUSTIN TORTOLANI, MD, NAMED A TOP DOC BY *BALTIMORE* MAGAZINE ANNUALLY SINCE 2013.

AS A YOUNG woman, Linda Yaffe underwent both lumbar and cervical bone graft fusions to her spine as a result of a car accident. The surgeries were successful but, she explained, “Forty years later, my back pain returned. I underwent recommended therapy, including spinal epidurals and physical therapy, from very reputable professionals.” However, the severe pain continued. She turned to her rheumatologist, who referred her to spine surgeon Justin Tortolani, MD, at University of Maryland St. Joseph Medical Center and a member of the University of Maryland Spine

Network. Yaffe looks back with gratitude, “I could be paralyzed if it weren’t for Dr. Tortolani. I’m really not exaggerating.”

EMERGENCY BACK SURGERY

On Yaffe’s very first visit, Dr. Tortolani examined her MRI, and she was stunned when he informed her that he was admitting her immediately.

She was shocked to learn that she needed emergency surgery for a rare condition called cauda equina syndrome which occurs when the nerve roots in the lumbar spine are

compressed, potentially cutting off sensation and movement.

“For my safety, he immediately sat me down in a wheelchair and said, ‘Don’t move. If you take another step, you could become paralyzed,’” Yaffe said.

BACK HOME AT UM ST. JOSEPH

Following surgery, a decompression and fusion operation performed by Dr. Tortolani at UM St. Joseph Medical Center, Yaffe made a strong recovery. She has been a patient of Dr. Tortolani’s ever since. Although Dr. Tortolani

relocated his practice for a number of years, he is now back at UM St. Joseph and a faculty member of the University of Maryland School of Medicine. Yaffe sees him for follow-up appointments.

“Dr. Tortolani is equally as exceptional medically and surgically as he is in giving support to his patients,” Yaffe said. “He’s so kind and caring. He listens to his patients.”

Indeed, Yaffe’s description of Dr. Tortolani’s personalized approach mirrors his own description of his practice philosophy as well as the gold standard of care at UM St. Joseph Medical Center.

“I believe in a patient-centered approach,” Dr. Tortolani said. “The patient is first and foremost in all the decisions that we make together. That’s what attracted me to UM St. Joseph Medical Center. It starts with the patient’s arrival at the hospital, to patient education, to what to expect during their treatment and stay. Educating the patient allows them to have a faster recovery. I try to put myself in the patient’s shoes.”

BACK PAIN IS A UNIVERSAL PROBLEM

“Seventy-five percent of the population experiences back pain at some time during their lives,” Dr. Tortolani said. “Humans weren’t designed to stand upright for as long as we see people living now. The result is wear and tear on our backs. Chronic back problems are most common in people over age 60. Even fit, active individuals can develop back problems.”

Common symptoms of a spine problem are pain, numbness or tingling that radiates down the extremities. The spine is surrounded by nerves that lead to the neck, arms and legs and is composed of small bones called vertebrae separated by discs, which are soft pads that act as shock absorbers. Discs have a soft, jelly-like center with a protective outer shell. When the outer part tears, gel can seep out, creating nerve pressure. A herniated disc in the upper part of the spine or neck (cervical spine) can cause shoulder and arm pain. A herniated disc in the lower spine (lumbar spine) can cause pain down the buttocks and legs, also called sciatica.

ADVANCEMENTS IN SPINE SURGERY

Dr. Tortolani reassures his patients that any old-fashioned fears about back surgery are unfounded and based on notions of what back surgery used to be decades ago. “People view their backs like their hearts,” he said. “I try to reduce their fears by explaining that back surgery is generally very safe.

“Twenty to 30 years ago, spine surgical techniques were much more invasive, and patients needed long hospital stays, casts or back braces for recovery. We have made incredible advancements. We use smaller incisions and new techniques. A one- or two-level fusion can be done with minimally invasive surgery. We used to take bone grafts from the patient to perform spine fusions. Now we use wonderful biologic materials. It’s a completely different atmosphere in the field of spine surgery.”



Linda Yaffe has been a patient of Dr. Tortolani for nearly 12 years.



THE SPINE INSTITUTE

7505 Osler Drive, Suite 506
Towson, MD 21204
umstjoseph.org/spine

DOING BACK SURGERY FOR THE RIGHT REASONS

“Data show that performing back surgery for the right reasons approximates the successful results of hip surgery, which is considered the No. 1 quality-of-life surgery,” said Dr. Tortolani, explaining that one of most important parts of his practice is figuring out whether surgery is the right option for his patients. “My philosophy is that we are going to exhaust all the nonoperative options for treatment first. About 80 percent of patients will get better without surgery. I strive to reserve surgery for patients where success is most predictable.

“Patients often don’t realize that we can offer them fantastic access to physical therapy,” he continued. “We also partner with a highly knowledgeable group called Maryland Pain Specialists, a member of the UM St. Joseph Medical Group that offers pain injections and spinal cord stimulation. Other possible alternative therapies include massage therapy, chiropractic care and acupuncture.”



Dr. Tortolani is accepting new patients. To make an appointment, call **410-337-4882**.



Neurologist Lynn Chouhfeh, MD, conducts a telemedicine visit with a patient.

USING TELEMEDICINE

HOW TO MAKE THE MOST OF YOUR ELECTRONIC HOUSE CALL

ONE SILVER LINING to the coronavirus pandemic: Many care providers are now offering telemedicine, allowing them to visit electronically—and safely—with patients who need them. This highly interactive, personal tool has existed for decades but was used infrequently—until now. Due to COVID-19, millions of Americans are discovering that telemedicine is an alternative way to have appointments with their doctors and other health providers using face-to-face technology from the comfort of their own homes.

CONNECT FROM YOUR DEVICE

Telemedicine is the new-age version of the old-fashioned doctor's house call. Your physician, nurse practitioner, physician's assistant, counselor or other health provider can meet with you electronically through your device—your computer, laptop, smartphone or tablet. Secure,

sanctioned telemedicine visits are conducted via Zoom videoconferencing initiated by your provider.

Many patients of University of Maryland St. Joseph Medical Center health care providers have expressed gratitude for the wonders and convenience of telemedicine.

"It was nice to know that we didn't have to leave the house to see the doctor," said Jeffrey Norris, a patient of Lynn Chouhfeh, MD, a board-certified neurologist with the UM St. Joseph Medical Group. "We could see her from the safety of our own home."

MYPORTFOLIO—YOUR SECURE HEALTH PORTAL

In addition, the University of Maryland Medical System has a secure health portal called *MyPortfolio*, through which patients can send private messages back and forth to their health providers, check their medical records, request prescriptions

and check lab results. Norris added, “Dr. Chouhfeh sent a message through the portal to check on me after my appointment to make sure that my wife and I were OK.”

“Since March 2020, I’ve been seeing three quarters of my patients through telemedicine,” said Michele DeMusis, MD, board-certified internist with the UM St. Joseph Medical Group. “It’s a safe way to see patients who are able to get their care but allows them to stay home. We know people are concerned about coming into an office building these days. With telemedicine, I can meet people where they are.”

Telemedicine can work well for specialty care, too. According to Richard Mackey, MD, a board-certified surgeon with UM St. Joseph Medical Group who specializes in hepatobiliary and pancreatic surgery and treats cancer patients, “For follow-up patients and those undergoing surveillance imaging, telemedicine has worked well. It provides a safe and convenient means of reviewing information. The patient can stay in their home environment while having their concerns addressed.”

Patients still may need to come into the doctor’s office or the hospital for specific visits that require in-person care or testing, but telemedicine is a versatile way to practice medicine and monitor patient illness.

TELEMEDICINE FOR TRIAGE

“We are now using telemedicine for triage and long discussions, such as going over patient records and tests or follow-up,” Dr. DeMusis said. “Medicare wellness appointments are also a great example of effective telemedicine visits. But there are certain things—such as looking into someone’s ear or throat or doing an EKG—for which we still need an in-person visit.”

MENTAL HEALTH VISITS INCREASE

Dr. DeMusis added that, since the pandemic, almost half of her telemedicine appointments are people calling with concerns caused by the stress of COVID-19. “Telemedicine

is very good for mental health appointments,” she said. “It’s a safe, supportive conversation over video. Internists are often the first point of contact for mental health if a person doesn’t have a mental health provider.” Dr. DeMusis has seen an increase in patients with anxiety-related physical symptoms, including stomach problems, heart palpitations and insomnia.

According to Dr. Chouhfeh, a specialist in movement disorders such as Parkinson’s disease, “I’ve been able to provide care to patients in nursing homes and assisted living facilities that have been on lockdown during the pandemic. It’s been their window for communication. They love it. They feel that they have not been left out because of the pandemic. It gives them the chance to ask me all kinds of questions. They are happy to have the provider in their homes through a camera. We can accomplish a lot during the visit.”

BRINGING PATIENTS AND PROVIDERS CLOSER TOGETHER

William Wilson, another patient of Dr. Chouhfeh’s, agreed. “It was a piece of cake to speak with Dr. Chouhfeh. The doctor’s office sent me a link through my email, and I clicked on it for the appointment. My daughter joined us and took notes. My needs were well addressed. I’m a diabetic and over age 60, so I don’t want to go out anywhere during the pandemic. I’m also having a telemedicine appointment with my internist soon to go over lab tests and results.”

Prior to the pandemic, Dr. Chouhfeh had experience with telemedicine for long-distance consults when she worked at the Veteran’s Administration hospital. “I am very excited to be using telemedicine again,” she said. “I find it very productive.”



To learn more about telemedicine at UM St. Joseph Medical Center, visit umstjoseph.org/telemedicine.



While telemedicine visits are helpful, sometimes an in-person appointment is necessary. Patient safety is of utmost concern and supported with mandatory masking and social distancing.

HEALING BY DESIGN

ADVERSITY'S GIFTS OFTEN come by surprise, or in disguise. This has been the case with the COVID-19 outbreak. In our relentless pursuit to sustain the highest levels of patient safety and clinical excellence, we have surveyed our pandemic experiences for “lessons learned” in order to identify our current strengths as well as guide us to further innovate so that we can provide safe, effective, personalized care, every touch, every time.

During the first phase of this pandemic, we found many gifts that became quickly apparent. The overwhelming support of our community was remarkable. This support inspired and safeguarded our team members, and elevated the care we provided to some of our most vulnerable patients to extraordinary levels.

Our new Philip A. Zaffere Emergency Care Flex Area has been a very special gift. This new space, which opened just before the pandemic hit in full force, provides a thoughtfully designed healing space that respects the comfort, privacy and dignity of our behavioral health patients. The Zaffere Emergency Care Flex Area has become a sanctuary for members of our community who are grappling—physically, emotionally and mentally—with the very real and very frightening implications of a worldwide pandemic.

In times of uncertainty, our community relies on UM St. Joseph Medical Center as a steadfast provider of loving service and compassionate, leading edge care. We are proud to be home to the Philip A. Zaffere Emergency Care Flex Area, a touch point for the kind of human connection that heals, nourishes and sustains those who need us most. Whenever you need us, we are here for you.

THOMAS B. SMYTH, MD
President and CEO
University of Maryland
St. Joseph Medical Center



The Philip A. Zaffere EMERGENCY CARE FLEX AREA

A TRANSFORMATIVE HEALING SPACE
FOR BEHAVIORAL HEALTH CARE THROUGHOUT
AND BEYOND COVID-19

NO ONE COULD have predicted the implications of COVID-19 and its resounding impact on our world, our nation, our state and our communities. But thanks to the kindness of the Philip A. Zaffere Foundation and several generous benefactors, University of Maryland St. Joseph Medical Center is able to meet the growing needs of our behavioral health patients during this emotionally trying time.

The Philip A. Zaffere Emergency Care Flex Area (ECFA) is a nine-bed healing space in the hospital's Harry and Jeanette Weinberg Emergency Department specifically designed for the care and comfort of behavioral health patients. The generously sized rooms feature protective windows that allow views of the outdoors. The Idalee Friedman Day Room, a central part of the unit's design, provides an airy and safe common area for patients who are able to spend time outside of their rooms.

“The Zaffere ECFA is designed to be as beautiful as it is healing,” said Harry Brandt, MD, chief of the Department of Psychiatry at UM St. Joseph Medical Center. “It is a light, spacious, warm and therapeutically efficient care environment.”

“The Philip A. Zaffere Emergency Flex Care Area is a beautiful, caring and safe haven for people with mental health issues and the dedicated staff who care for them. It's an honor to have Phil's name adorn this space, which will provide specialized and compassionate support to those in grave need.”

— PHYLLIS AND LOUIS FRIEDMAN AND FREDDIE TRAUB,
TRUSTEES OF THE PHILIP A. ZAFFERE FOUNDATION



Philip A. Zaffere transformed his father's bakery into Shoreman Food Technologies. His innovations led to commercially viable processes and products enjoyed by millions of Americans today. Mr. Zaffere was intelligent, caring, generous, proud, hardworking and humble. His many inventions—and his kindness—have touched countless lives.



A LEGACY OF CARE

The Zaffere ECFA marks a timely milestone in our history of innovative behavioral health care. In 1962, UM St. Joseph Medical Center opened the first community Catholic hospital-based psychiatric unit in the area. The Zaffere ECFA continues our legacy of exceptional community-based behavioral health care at a particularly crucial time for our patients. When the space opened in January, “We didn’t anticipate COVID-19, but the Zaffere ECFA has been a godsend for staff and patients, giving those with behavioral health needs a safe, expansive treatment area,” Dr. Brandt said. An added benefit of the thoughtfully designed space: rooms can be flexed, as needed, to provide care and isolated space for patients with urgent medical concerns.

“The pandemic is challenging for everyone, but especially for patients with behavioral health disorders,” Dr. Brandt said. In addition to feelings of panic about getting or transmitting the coronavirus and losing loved ones, they are coping with isolation, stress and disrupted life patterns, along with their mental illness. “We expect to see the aftereffects of COVID-19 for a long, long time. We’re just now beginning to explore its

effect on long-term mental health and brain chemistry. COVID-19’s impact will be profound, and we’re in a better place to serve these patients because of the Zaffere ECFA.”

With the creation of the Zaffere ECFA, staffed 24/7 with a dedicated psychiatric health team, UM St. Joseph has again risen to meet the emerging needs of our behavioral health patients.

“The Philip A. Zaffere Foundation’s remarkable act of generosity, along with that of many like-minded supporters, made the Zaffere ECFA a reality and has taken UM St. Joseph a huge step forward in providing behavioral health support for our most at-risk patients in an environment designed for their best health and healing,” Dr. Brandt said. “We couldn’t be more grateful.”

WITH GRATITUDE

We give special thanks to these donors who, in addition to the Philip A. Zaffere Foundation, made the Zaffere ECFA and its programs possible with a leadership gift of \$25,000 or more:

- Louis and Phyllis Friedman Foundation
- Karen and Michael O. Brooks Family
- Orokawa Foundation
- Kelso Bishop Family Foundation
- The John J. Leidy Foundation
- State capital funds through the private hospital program recommended by the Maryland Hospital Peer Review Committee
- France-Merrick Foundation
- Joan and Norris Cook
- Leonard and Helen R. Stulman Charitable Foundation



READY FOR **COVID-19:**

ACTIVATING A
BIOCONTAINMENT
UNIT FOR THE
SICKEST PATIENTS

IT'S OFTEN WHERE THE MOST COMPLEX PATIENTS MUST TURN: AN ACADEMIC MEDICAL CENTER.

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

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

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

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

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

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

ACTIVATING THE BCU

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

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

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

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

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

ON THE UNIT

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

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

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

SUSTAINING LIFE

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

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

DONNING AND DOFFING PPE

Personal protective equipment (PPE) is vital in keeping the clinical teams safe. The specific way the PPE is put on and taken off is called donning (putting on) and doffing (taking off).

Learn more about ECMO by visiting umm.edu/ECMO.

There are staff dedicated to ensuring PPE is donned and doffed properly. It takes 5 to 10 minutes to don the PPE. Doffing can be lengthier since the team must be extra careful not to contaminate themselves.

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

DIFFERENT STYLE OF NURSING

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

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

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

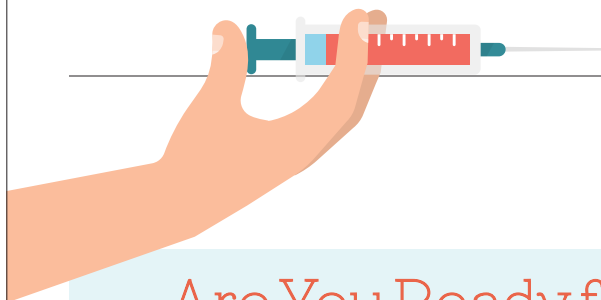
CELEBRATING THE WINS

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

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



Hear more from the team in the Biocontainment Unit at umm.edu/BCU.



Are You Ready for FLU SEASON?

THE COVID-19 PANDEMIC MAY BE TOP OF MIND, BUT ANOTHER DANGEROUS RESPIRATORY ILLNESS—FLU—IS ALREADY CIRCULATING.

FLU CASES TYPICALLY peak between December and February. Here’s what you can do to prepare:

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

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

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

GET IN A GOOD HYGIENE GROOVE. If you start practicing preventive steps now—such as washing hands often, not touching your face, covering your mouth when coughing or sneezing, and sanitizing frequently touched objects and surfaces—they’ll be second nature by flu season.



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

Where to Turn FOR CARE

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



DOCTOR'S OFFICE \$

Your primary care physician knows you best, so turn here first unless your need is urgent. Best for:

- Routine wellness visits, preventive care and immunizations
- Treating rashes, cold and flu symptoms, high blood pressure, tooth pain, sore throat, pink eye, lower back pain, animal or insect bite, urinary tract infections
- Diabetes management, Pap smear, colonoscopy

TELEMEDICINE VISIT \$

Remote visits are convenient and provide social distancing. Best for:

- Treating seasonal allergies, sinus infection, rash, conjunctivitis, headache, back strain, minor burns, urinary tract infections, cold and flu symptoms
- Managing asthma, COPD and other pulmonary conditions, behavioral health, cancer treatment symptoms, diabetes, gastrointestinal conditions, high blood pressure and many other heart and vascular conditions, neurological conditions, pain management, palliative care, and some prenatal appointments



PATIENT HEALTH PORTAL [\$\$\$]

A secure online portal supplements telemedicine or doctor's office visits by providing access to health information anywhere with an internet connection. UMMS patients use MyPortfolio. Best for:

- Direct messaging for answers to basic medical questions
- Accessing test results
- Requesting appointments and prescription refills
- Check in online before an appointment



URGENT CARE CENTER \$\$

Turn here if you have an urgent but not life-threatening need for care when your doctor's office is closed, your doctor is unavailable or you don't have a primary care physician. Best for:

- Treating sprains and strains, injuries requiring stitches, cold and flu symptoms, sore throat, rash, pink eye, tooth pain, lower back pain, animal or insect bites, urinary tract infection



EMERGENCY ROOM \$\$\$

Seek emergency care immediately in a potentially life-threatening situation. Best for:

- Allergic reactions, breathing problems, babies needing immediate care, serious eye or head injuries, severe burns, suspected drug overdose, poisoning, severe abdominal pain, severe chest pain, possible heart attack or stroke symptoms, high fever



COST FOR MOST INSURED PATIENTS

[\$] = free

\$ = most affordable

\$\$ = more expensive

\$\$\$ = can be very expensive

Co-pays and fees may vary depending on insurance coverage and other factors.



To find out how to access care near you, including telemedicine virtual visits with a doctor, visit **umms.org**.

HEALTH MATTERS CALENDAR

Community Health Events

FALL 2020/WINTER 2021

INFLUENZA (FLU) VACCINATIONS

Free community flu vaccination clinics will be offered at various locations through fall 2020. Appointments and masks are required. **Please visit umstjoseph.org/flu or call 410-337-1337 for more information and to register.**

HEALTH SCREENINGS

PROSTATE CANCER SCREENING

For men 50–70 years of age. African American men and men with a first-degree relative (father, brother, son) diagnosed before age 65 should consider screening starting at age 40. Consists of digital rectal exam (DRE) and prostate specific antigen (PSA) blood test which, in combination, can detect prostate cancer at an early and potentially curable stage. **Appointment required. Call 410-337-1479.**

- Thursday, Dec. 3, 5pm–7:30pm
- Cancer Institute

PROGRAMS

CHRONIC PAIN SELF-MANAGEMENT

Free six-week workshop for those experiencing chronic pain to help with goal setting, fatigue and pain management. Topics include proper nutrition and exercise, communication with physicians and family members, and relaxation techniques. Program includes simple exercises to help relieve pain. To be held virtually on Zoom. **Registration required. Call 410-337-1479.**

- Tuesdays, Jan. 12 through Feb. 16, 10am–12:30pm

PREVENT T2

A class for those with prediabetes with a goal of preventing or delaying the onset of Type 2 Diabetes. Group meets regularly for a full year. To be held virtually on Zoom.

Registration required. Call 410-337-1479.

- Thursdays beginning Jan. 7, 4:30–5:30pm

AMERICAN RED CROSS BLOOD DRIVE

Schedule a lifesaving donation. For medical and eligibility questions, please call 1-866-236-3276 before scheduling your appointment. **To register, call 1-800-733-2767 or visit redcrossblood.org.**

- Thursday, Nov. 12, 7am–4:30pm
- Wednesday, Dec. 9, 7:30am–11:30am
- Irwin Center

LET'S TALK ABOUT HEALTH

A Community Conversation

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

- Third Wednesday of every month, 12pm

CLASSES AND SUPPORT GROUPS

STROKE SURVIVOR SUPPORT GROUP

Provides a forum for learning, listening and socializing with others. Our free stroke support group encourages participants to share their experiences as well as offer comfort and empowerment to others. A team of stroke professionals will provide useful information about healthy living, stroke management and support after experiencing a stroke. Meetings held virtually on Zoom. **Call 410-427-2175 or contact KarenGonzalez@umm.edu to register.**

- Third Tuesday of every month, 2–3:30pm



FAMILY EDUCATION CLASSES

CALL 410-337-1880 OR VISIT [UMSTJOSEPH.ORG/READYFORBABY](https://umstjoseph.org/readyforbaby) TO REGISTER. FEES APPLY.

CHILDBIRTH CLASS

Our childbirth classes provide educational and helpful information for happy and healthy birth-and-beyond experiences. Classes are taught by registered nurses certified in childbirth education, with years of skilled and compassionate clinical experience. Offered as a five-week series, a three-week series or a day-long class, to meet your scheduling needs.

ON-DEMAND CHILDBIRTH CLASS

This childbirth class is designed with YOU in mind—specifically for busy parents who can't commit to in-person classes. You will be assigned your own certified childbirth educator for one-on-one personal consultations at your convenience, with all the education and information you need provided virtually.

BREASTFEEDING CLASS

Is breastfeeding right for you? Learn about the benefits to you and baby, best-bet techniques and tips for success. This one-day class is for expectant mothers and their partner to provide education and an introduction to breastfeeding your baby. This class is taught by a certified lactation consultant.

BABY CARE CLASS

Care for your baby with confidence! This two-session class offers expert instruction from our registered nurse educators, to teach you what you need to know before bringing your baby home and for caring for your little one throughout the first year.

BREATHING EASIER FOR BABY

Allows you and your partner time to learn and practice the skills you need for labor and delivery of your newborn. Designed for couples planning for low-intervention or unmedicated birth experiences, this class provides education to help parents labor at home longer or manage labor comfortably after being admitted to the hospital.

COMING SOON! PRENATAL YOGA

Stay active and healthy during your pregnancy. This yoga class is offered to expectant mothers delivering at University of Maryland St. Joseph Medical Center and is taught by one of our certified yoga instructors.

GRANDPARENTS' UPDATE

A great “refresher” for new grandparents, featuring instruction on infant CPR and choking safety, the latest safety concerns regarding newborns, and how to best support and care for the new mom and baby you love.

CIRCLE SUPPORT GROUP

For women in pregnancy, postpartum and throughout life, led by one of our certified midwives. Meets on the second and fourth Monday of every month from 2:30–4pm.

COMING SOON! LITTLE LATCH CLUB

Join one of our board-certified lactation consultants and share your feeding questions or concerns. Meet and bond with other mothers to discuss the triumphs and challenges of motherhood. Whether you bottle- or breastfeed, you are welcome to join us! Meets every Thursday from 10am–2pm.



Better never stops. University of Maryland St. Joseph Medical Center has been recognized *for the second consecutive year* as a Best Hospital for 2020-21 by *U.S. News & World Report*. Named #3 in both the state and the Baltimore Metro area, **UM St. Joseph is the highest-ranking community hospital in Maryland.**

We owe this recognition to our staff and physicians' relentless commitment to providing high-quality, safe and compassionate patient care for all those we serve. We are most proud because of what this accomplishment means for our patients: excellent outcomes, improved health and wellness, and greater access to the very best care.