

Johns Hopkins Bayview

# health & wellness

## Never Stop Growing

After living a life for others, a grandmother learns the importance of diabetes treatment and self-care

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JOHNS HOPKINS  
MEDICINE

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## View Your Health Records on Your iPhone®

Johns Hopkins Medicine supports health records in the Apple® Health app, which is available to patients with an iPhone running iOS 11.3 or later. Apple Health's updated "Health Records" section helps organize all of your medical information from various institutions into one app, and alerts you when new information is available. You can log in to Apple Health with your MyChart username and password to easily and securely access your allergies, conditions, immunizations, labs and more.






You must have a MyChart account to view your health records. Setup is simple. Open the Health app and search for Johns Hopkins Medicine to log in to MyChart, or visit [mychart.hopkinsmedicine.org](http://mychart.hopkinsmedicine.org) to learn more.



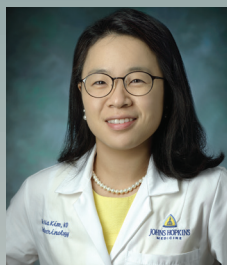
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Patients now receive only one bill for health care services throughout Johns Hopkins Medicine and there are three ways to pay your new bill:

-  Online through your MyChart account at [mychart.hopkinsmedicine.org](http://mychart.hopkinsmedicine.org).
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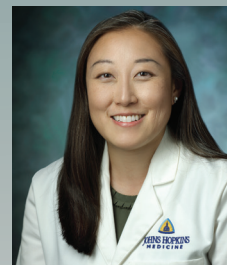
**For questions about your bill, including payment plans, financial assistance or information changes, please call 1-855-662-3017.**

## Welcome New Physicians



Han Na Kim, M.D.  
Endocrinologist

**Han Na Kim, M.D.**, joins the Division of Endocrinology, Diabetes and Metabolism. She specializes in general endocrinology with a focus on metabolic bone disease.



Jinny Suk Ha, M.D.  
Oncologist

**Jinny Suk Ha, M.D.**, joins the Lung Cancer Program in the Kimmel Cancer Center. She specializes in benign tumors of the lung, lung cancer, lung transplantation, chest wall tumors, esophageal cancer and esophageal reconstruction.

To schedule an appointment, call 410-955-9270.

To schedule an appointment, call 410-955-LUNG (5864).

## Honoring Your Wishes: Your Voice Matters



*Johns Hopkins Bayview offers free advance directive training*

**C**onversations about end-of-life care are not easy. Most of us don't want to think about tragedy or death, so it's good to start these discussions in a safe and nurturing environment.

"Honoring Your Wishes: Your Voice Matters," is a free workshop about advance directives that encourages individuals to be partners in their health and have a voice through all stages of life: wellness, chronic illness and

end of life. Made possible by a grant from the Maryland Department of Health, the workshop is a partnership between the Department of Spiritual Care and Chaplaincy, Medicine for the Greater Good and the Healthy Community Partnership at Johns Hopkins Bayview. Participants learn what advance directives are; how to write an advance directive (on paper and online); and how to communicate final wishes.

**If your congregation or community organization is interested in hosting a free workshop, call 410-550-1197.**

## What is an Advance Directive?

An advance directive is a written document that tells your health care providers who should speak for you (as a health care agent) and what medical decisions they should make if you become unable to speak for yourself or are at the end of your life.

Naming a health care agent is the single most important thing you can do to make your wishes known.



To learn more about the importance of an advance directive, visit

[hopkinsmedicine.org/jhbmcc/advancedirectives](http://hopkinsmedicine.org/jhbmcc/advancedirectives).



**Matthew Czarny, M.D.**  
Cardiologist

**Matthew Czarny, M.D.**, joins the outpatient cardiology clinic as the director of the structural heart disease clinic. He specializes in the evaluation and management of complex coronary artery disease and minimally invasive treatments of structural heart disease.

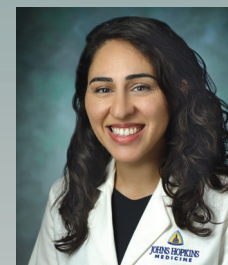
To schedule an appointment, call  
410-550-9227.



**Danielle Patterson, M.D.**  
Urological Gynecologist

**Danielle Patterson, M.D.**, joins the Johns Hopkins Women's Center for Pelvic Health. She specializes in treatment of pelvic floor disorders, including urinary incontinence, pelvic organ prolapse, overactive bladder and voiding dysfunction.

To schedule an appointment, call  
443-997-0400.



**Golsa Yazdy, M.D.**  
Gynecologist and Obstetrician

**Golsa Yazdy, M.D.**, joins the Department of Gynecology and Obstetrics. She specializes in obstetrics and gynecology.

To schedule an appointment, call  
443-997-0400.



# Never Stop Growing

After living life for others, a grandmother learns the importance of diabetes treatment and self-care.

**B**arbara Ward, in her own words, has a soft heart. The self-described “country girl” has been at the root of her family’s lives—shepherding children, grandchildren and great-grandchildren up and down the East Coast and managing all the highs and lows of her 72 years.

Ward grew up in North Carolina before meeting her husband Frank at 16 and getting married two years later. His job as a truck driver took him on the road, and they moved to New Jersey and Connecticut before settling in Baltimore. Along the way, they had two sons and three daughters, “13 or 14” grandchildren and too many great-grandchildren to count. Ward is a doting mother who believes in keeping her family together. She still has trouble talking about her two sons who died before their 30th birthdays—one of cancer and the other of pneumonia. Her nurturing spirit has never changed; she helped raise several of her grandchildren over the years.

## Life Doesn’t Stop with Diabetes

One day in 2008, Ward went outside and started sweating and shaking. She thought something in the air was making her sick, but her husband called an ambulance. When the EMTs arrived, they told Ward she had diabetes—



*Barbara Ward has rededicated herself to her health after her diabetes diagnosis.*



To learn more, visit [hopkinsmedicine.org/diabetes](http://hopkinsmedicine.org/diabetes) or call 410-955-9270.



her blood sugar levels were five times higher than normal. She spent several days at Johns Hopkins Bayview Medical Center before returning home.

Ward began to make changes in her life—she learned to give herself insulin and manage her medications throughout the day. She even quit smoking, going cold turkey after 40 years by throwing her cigarettes out the car window on Pulaski Highway. Unfortunately, a year later, Ward learned her husband, also a lifelong smoker, had throat cancer. She retired and spent nights at his bedside in the hospital, then became his primary caretaker while he was at home.

This might start to sound familiar: a retelling of the modern parable of the tree who gives herself to others so completely that she ends up with nothing. Ward admits that at times, she felt like she was taking care of everyone but herself, and rarely paid attention to her diabetes or general health. After her husband's cancer spread to his lungs, he died in 2014, after 52 years of marriage.

## Monthly Diabetes Classes

If you or someone you're close to wants to learn more about diabetes treatment, the Johns Hopkins Diabetes Center holds monthly classes from 5:30 to 6:30 p.m., covering strategies to manage blood glucose levels, the importance of making the right food choices, what your blood glucose numbers mean and medications to help manage type 2 diabetes.

### Classes will be held:

January 14:

Diet and Diabetes, taught by a dietitian

February 11:

Insulin Therapy, taught by a pharmacist

March 11:

Living with Type 2 Diabetes

To learn more or register, visit [hopkinsmedicine.org/jhbm/seminars](http://hopkinsmedicine.org/jhbm/seminars) or call 410-550-KNOW (5669).

Ana Tucker, M.D.  
Primary Care Provider



## Loving Others by Loving Yourself

Ward wasn't alone, having taken in her 12-year-old granddaughter after her husband's death, but being widowed was hard for her. Her family kept telling her she needed to take better care of herself, but one day, Ward's granddaughter asked her, "If something happens to you, what's going to happen to me?" Ward hadn't ever thought of her health mattering to others, and tried to reassure her granddaughter, who shot back, "You're almost 100!" Even if Ward didn't feel that old, she realized her health impacted the people who loved her. Along with her granddaughter, she began eating a healthier diet, and started to take her diabetes treatment more seriously. Her primary care provider, Ana Tucker, M.D., and the faculty and staff at the Johns Hopkins Diabetes Center at Johns Hopkins Bayview helped her build a medication and lifestyle plan she could commit to. In addition, she formed a close relationship with Mary Beth Carlin, RN, a nurse at the Diabetes Center who helps address patients' questions and concerns. Carlin connected Ward with a General Equivalency Diploma (GED) program in her building, and the two talk regularly about Ward's health and her life.

Ward fills her busy days with family, puzzles and earning her GED. She's planning to lose weight and get healthier, saying, "I'm always going to be in my grandkids' lives. I want to live to see them all grown up."

—Martin Fisher



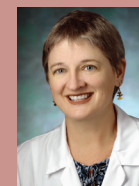
Watch Barbara tell her story at [hopkinsmedicine.org/jhbm/patientstories](http://hopkinsmedicine.org/jhbm/patientstories).

## Diabetes Prevention

Sudipa Sarkar, M.D.  
Assistant Professor  
of Medicine



The Johns Hopkins Diabetes Center, a multidisciplinary diabetes treatment program offering a rare level of extra support for patients, is led at Johns Hopkins Bayview Medical Center by Sudipa Sarkar, M.D., and Caitlin Nass, CRNP. The center provides individualized treatment and can be of special help to patients with longstanding or hard-to-treat diabetes, type 1 diabetes, or patients with other chronic illnesses that impact their blood sugar control. In addition to education and medication management during appointments, patients can call the team nurse to discuss their treatment, or connect with their care team electronically to review their blood sugars. The team works closely with dietitians at Johns Hopkins Bayview, who are all certified diabetes educators. The center also has a dedicated community health worker to connect patients with prescription assistance, help with housing or transportation issues, and food access.



Caitlin Nass, CRNP  
Diabetes Nurse Practitioner

To learn more, visit  
[hopkinsmedicine.org/diabetes](http://hopkinsmedicine.org/diabetes)  
or call 410-955-9270.



# Think 75 Is Too Old To Have Surgery? *Think Again.*

Geriatric surgery program offers comprehensive care for patients over 65

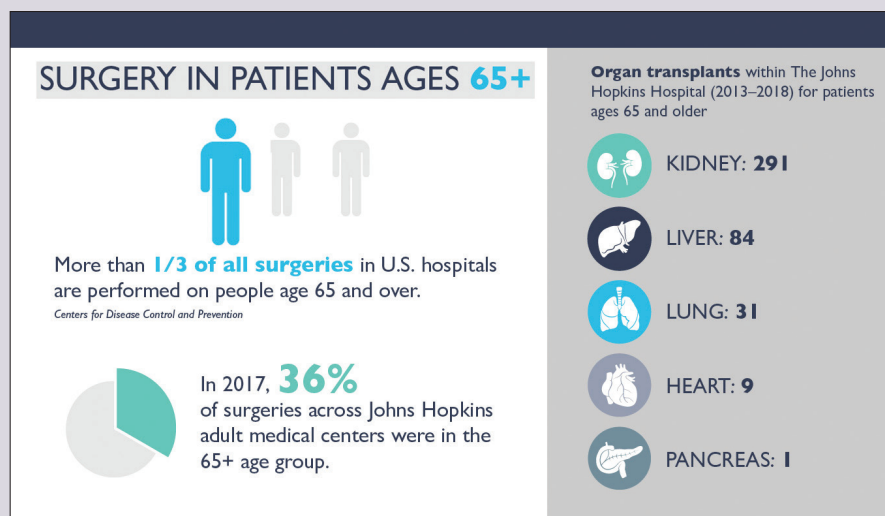
James Brantner had always been good about maintaining his health. He sees his primary care doctor annually, avoids sweets and developed a habit of walking 3.5 miles every other day near his home just outside Harrisburg, Pennsylvania. So, when a routine colonoscopy in 2017 showed evidence of cancer, Brantner, then 76, was stunned. He'd need 12 radiation treatments followed by surgery to reconstruct his colon. His physician recommended colorectal surgeon Susan Gearhart, M.D. "The surgery was quite extensive," says Brantner. "Dr. Gearhart was very upfront with me—and compassionate." More than a third of all surgeries in U.S. hospitals—inpatient and outpatient procedures combined—are now performed on people age 65 and over, according to the Centers for Disease Control and Prevention. Last year, across Johns Hopkins Medicine, nearly 50,000 surgeries took place in the 65-plus population.



Susan Gearhart, M.D.  
Surgeon

Now, Johns Hopkins Bayview is working to become a "center of excellence" in geriatric surgery. This designation would mean that the American College of Surgeons recognize the Medical Center as offering a high concentration of expertise and re-

sources devoted to caring for older adults in need of surgery, leading to the best possible outcomes.



## Assessing Cognition, Frailty and Function

With each passing year after age 65, older adults are increasingly vulnerable to complications and readmission after surgery, says geriatrician John Burton, M.D.

Many have multiple chronic conditions, including diabetes, high blood pressure and arthritis, and may have depression or dementia. Some take lots of medicines that cause side effects. After surgery, elderly people also are more likely to suffer from hypothermia, hypoglycemia and anemia.

Dr. Burton says successful surgical outcomes for older patients require meticulous planning, pre- and postoperatively. He and his colleagues

assess patients by testing for frailty, cognitive lapses, depression, shortness of breath, and poor

muscle tone and balance. Specially trained geriatric nurses, pharmacists, physical therapists and social workers also play a crucial role.

## Extending Hope

Five months after James

Brantner's colon surgery, he's enjoying more of his favorite foods and his increased stamina.

The last time he saw Dr. Gearhart, Brantner mentioned he was still worried about his health. After examining him and learning about his progress, she reassured him: "You know what? You're going to be all right."

"I had to agree," Brantner says. "You can't go through life thinking about this all the time. I have a wife, two sons and two grandchildren, and I intend to make the most of my time."

—Judy F. Minkove

*A longer version of this story appeared in the July/August issue of Johns Hopkins Medicine's Dome.*



To learn more about the geriatric surgery program, call 410-550-6675.



# AMP Up ↑

*Getting  
patients  
back on  
their feet*

**D**id you know that bedrest can be toxic, and is linked to ongoing disability? Especially at risk are hospitalized patients.

To this end, Johns Hopkins Bayview has initiated AMP (Activity and Mobility Program), which focuses on getting patients out of bed and moving. AMP's goal is to help patients maintain a level of mobility, and to keep them active during their hospital stay. It has been found that even a limited number of daily steps during hospitalization can mean the difference between functional decline and independence.

"Patients can regress quickly and don't even realize it," says Michelle D'Allesandro, director of medical nursing at Johns Hopkins Bayview. "By focusing on mobility, we are able to improve patient outcomes, expedite recovery time, and shorten length of stay."

## **Taking Measures to Get Moving**

AMP begins upon admission, when patients are assessed for a baseline mobility by their nurse or patient care technician. The care team then creates a mobility plan that outlines daily goals for time out of bed and for walking. Nursing

staff champion the program, and collaborate with physical therapists, physicians and others on the team so that the patient's mobility is discussed during multidisciplinary rounds—with the goal of having patients achieve their highest level of ability.

Says D'Allesandro, "Introducing this initiative has led to greater patient engagement and improved experience. More importantly, we are able to bring patients back to independence."

—Emily Dressel





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## Meditating for Mindfulness

**W**e are no strangers to stress. Our bodies are often in a fight or flight response even when there is no immediate danger. This is what is unique about being human—we can turn on the stress response simply by thinking about a stressful situation (like our never-ending daily to-do list). Clinical psychologist Neda Gould, Ph.D., teaches mindfulness meditation as a tool to combat stress.

“Mindfulness meditation is a form of present-moment awareness that can be cultivated with practice,” she says. “Research shows that mindfulness meditation reduces stress, anxiety, depression and pain, and improves our overall well-being.”

Dr. Gould learned how to teach mindfulness in 2008, when she was working with burn patients. Her clinical work and research focus on how mindfulness training can improve the

well-being of patients with various medical and psychiatric illnesses.

Want to try mindfulness for yourself? The following two-minute meditation is a great way to start incorporating these skills into your daily life: Take a breath, relax your shoulders, and spend a few minutes doing nothing more than looking at this picture.

*“To practice this type of meditation, begin by looking at the image broadly, noticing colors, textures, depth and shading,” says Dr. Gould. “Then take a moment to focus on a particular part of the photo and explore these same components there. When thoughts take you away from the image, just gently return to what you see.”*

### Johns Hopkins Bayview health & wellness

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This issue is available  
online at  
[hopkinsmedicine.org/jhbmc](http://hopkinsmedicine.org/jhbmc)

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is published by the Johns Hopkins Bayview Medical  
Center Office of Marketing and Communications  
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