

FALL 2014

# Sibley ONHealth

SIBLEY MEMORIAL HOSPITAL, A MEMBER OF JOHNS HOPKINS MEDICINE



Hospital-wide  
response yields  
miraculous results.



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## Sibley Honored for Excellence

Sibley is the only D.C. hospital to receive the coveted Excellence Award for Quality Improvement in Hospitals by the Delmarva Foundation of the District of Columbia. The honor recognizes hospitals that excel in 14 key patient safety and quality improvement measures in the clinical areas of heart failure, surgical care, pneumonia and immunization.



### President's Message

For more than 120 years, Sibley Memorial Hospital has served our community as part of its mission to provide the best health care available to those who trust us with their health. Examples of this commitment are contained in the "Community Benefit Report" in this edition of *On Health*. In return, our

community has helped us. While many support us, serving as volunteers, on various hospital committees or through donations, others have made extraordinary and lasting contributions such as the Reed family. For decades, Stacy M. Reed, Esq., his wife, Mrs. Stacy M. Reed and their family have played crucial roles in Sibley's success. Mr. Reed passed away in 2000 at age 101 after serving as a member of the Sibley board of trustees and its executive committee since 1956. He was elected chairman of the board in 1960 and president of the hospital in 1968, serving in both offices until 1999. Mrs. Reed, often referred to as the "First Lady of Sibley," just celebrated her 106th birthday! Their daughter, Katherine D. Keogh, served as director of volunteers for 25 years. Their grandson, Michael K. Farr, continues the legacy by serving as chairman of our foundation board of trustees and as a member of the Sibley board of trustees. It is these relationships that help bind us to our community.

I'm happy to report that our Innovation Hub, believed to be one of the few community hospital-based centers designed to foster innovative new ideas in the nation, is now up and running. It is designed expressly to be the physical and intellectual catalyst for sparking exciting new ideas and solutions to improve the care at Sibley and health care throughout the nation. It is a real-world laboratory for testing new ideas and for providing the skills upon which to implement them.



The Sibley Innovation Hub

Our commitment to serving our community with compassionate and high-quality care remains rock-solid, as is the ultimate goal to make Sibley the best, safest and most innovative community hospital in the nation. We have superb community physicians, outstanding nurses and staff and a leadership team dedicated to making Sibley the premier community hospital.

You deserve no less than the best health care, and the entire Sibley and Johns Hopkins Medicine family is devoted to ensuring you receive it.

Richard O. Davis, Ph.D.  
President  
Sibley Memorial Hospital



Nadia Eltaki, M.D., emergency physician (right), giving direction to Benjamin Miles, clinical pharmacist, Kimberly McLeoud, R.N., Kim Hinton, R.N. and Juli Morgan, C.A., in the emergency department resuscitation room.

# AGAINST ALL ODDS

## **Extraordinary response saves patient with ruptured aneurysm**

As a snowstorm raged, Marc Levenson arrived at Sibley’s emergency department (ED) barely conscious, in profound shock, with massive internal bleeding. His heart stopped three times. His blood pressure bottomed out. An extraordinary hospital-wide response saved his life.

Marc Levenson had no idea he was about to suffer an extreme health crisis. When a weak area in the abdominal aorta, your body’s largest artery, slowly bulges, then balloons, then bursts, it happens with virtually no warning. Levenson felt sudden pain, collapsed and was rushed by ambulance to Sibley.

**Statistically, only 50 percent of people in this condition live to reach an operating room. Of those, there is a 90 percent mortality rate. Every minute that passes, that mortality rate increases by 1 percent.**

“When he arrived he was white as a sheet, with blood pressure so low it could barely be detected,” emergency physician, Nadia Eltaki, recalls. “An EKG ruled out a heart attack. His pain and distended abdomen made me suspect a ruptured aortic abdominal aneurysm (AAA), which I immediately confirmed with an ultrasound.”

Dr. Eltaki called a Code Blue, requested any surgeon in the building and had a nurse alert Sibley’s blood bank. “We instantly had many extra hands on deck—anesthesiologists, respiratory therapists, an intensive care unit (ICU) nurse, a surgery resident—a team of at least 20. The blood bank responded immediately and within minutes he was on a ventilator and receiving transfusions.”

.....  
*“Everyone was in the right place at the right time. Each person knew their role and carried it out effectively and efficiently. I felt like the captain of a very smooth sailing ship.”*  
.....

— Nadia Eltaki, M.D., emergency department

Vascular surgeon, Joseph Babrowicz, was contacted. “I was at another hospital when Dr. Eltaki called. While we were on the phone, the patient went into cardiac arrest. I dropped everything and headed for my car.”

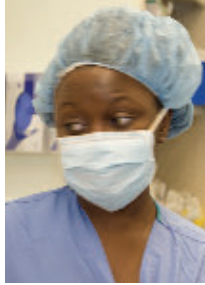
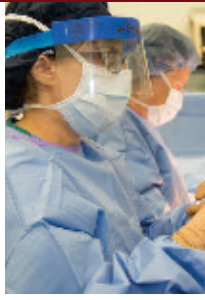
“Our team performed CPR and brought him back from cardiac arrest not only once, but twice,” notes Dr. Eltaki.

*Continued on page 2*





*Benjamin Miles, clinical pharmacist, Kim Hinton, R.N., Juli Morgan, C.A., Kimberly McLeoud, R.N., and Nadia Eltaki, M.D., resuscitating the patient.*



*Joseph Babrowicz, M.D., vascular surgeon, in surgery. Top right: Kimberly Antonelli, R.N., and Kathleen Haywood, P.A.-C, and Mamta Miles, CRNA, assisting Dr. Babrowicz during surgery. Bottom right: Abiola Adeshoga, R.N., and Marplet Findlay, R.N., in the operating room during surgery.*

“I was 100 percent sure of my diagnosis and insistent that we get him into surgery as fast as possible. Just 38 minutes after arrival, Mr. Levenson was in the operating room (OR). It was a truly excellent, concerted effort.”

An anesthesiologist aiding resuscitation efforts in the ED alerted the OR. “This activated an instant response from additional anesthesiology physicians, nurses and technicians who began preparing advanced monitoring, infusion and transfusion equipment for surgery,” notes Andrei Cernea, M.D., chairman of anesthesiology.

*“Thanks to a series of coordinated actions, the patient was rapidly transported, prepared and given the best chance to benefit from a lifesaving surgery.”*

— Andrei Cernea, M.D., chairman of anesthesiology

The surgeon rushed in just as the patient arrived in the OR. “Since the snowstorm had cleared traffic from the streets, I was able to make a 45-minute trip in only 15,” says Dr. Babrowicz. “I had to tell the patient’s wife that most people don’t survive this horrible situation, but we would do absolutely everything we could.”

When a patient who is in critical shock undergoes anesthesia, blood pressure often plummets. In fact, as soon as Levenson received anesthesia he experienced his third cardiac arrest. “I rapidly opened the abdomen, reached in and compressed

the aorta with my hand,” reports Dr. Babrowicz. “That allowed the anesthesia team to resuscitate him within just a few crucial moments. They did a spectacular job of keeping him alive throughout the surgery.”

Working quickly, Dr. Babrowicz strategically placed a series of clamps on the upper and lower portions of the aorta, isolating the area where the aneurysm had ruptured. Life-threatening bleeding was halted, while life-sustaining blood continued to

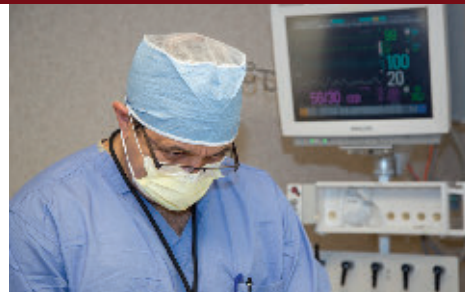
*“I reached in and compressed the aorta with my hand while the anesthesiology team brought him back from cardiac arrest.”*

— Joseph Babrowicz, M.D., vascular surgeon

the heart, lungs, liver, kidney and intestines. He replaced the ruptured section of the aorta with a strong, durable artificial graft, enabling blood to pass through normally once again.

“Since our patient was still in such severe shock, we made the decision to leave the abdomen open. This allows room for swelling which is a normal response to shock and prevents other serious complications. Two days later he returned to the operating room for re-examination, and two days after that we performed a final surgery to close the abdomen.”

Sibley’s ICU team focused on stabilizing Levenson, providing essential blood products and constantly monitoring his blood pressure. “Communication is key,”



*Annalise Budd, R.N., Sheri Akinmurele, R.N., and Arman Firouzi, M.D., just finished coding the patient in the ICU.*

*Top: Arman Firouzi, M.D., putting in a central line.  
Bottom: Annalise Budd, R.N., and Kim Petrilik, R.N., checking medications.*

notes ICU nurse, Annalise Budd. “His great outcome reflects the entire effort from diagnosis to surgery to nursing to physical therapy. It’s incredible that a man who died three times could be brought back to life, surgically repaired, stabilized in the ICU and walk out the door 10 days later.”

“Sibley is well known as a hospital for elective procedures, but this patient could not have been in a more unexpected, urgent, extreme situation,” Dr. Babrowicz points out. “His case shows that the talent is right here at Sibley. When an immediate, complex response was essential, Sibley was ready. It was a remarkable hospital-wide success for our patient. The emergency department, anesthesiologists, transport team, operating room staff, blood bank, nursing support and intensive care unit all combined for a tremendous life-saving effort.”

*“Everyone worked together, pushing their limits, to make the impossible happen. It was truly a miraculous save.”*

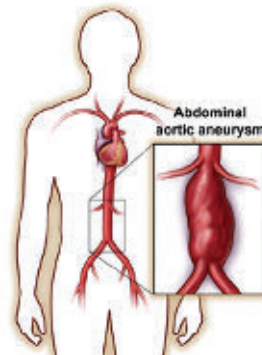
— Martin G. Paul, M.D., chairman, department of surgery

“Only a perfectly executed response can rescue a patient like this from almost certain death,” notes Martin G. Paul, M.D., chairman, department of surgery. “Sibley’s unique spirit and teamwork made his survival possible. Sometimes it takes a crisis to see what our hospital is truly capable of.”

*“Ruptured abdominal aneurysms are preventable. There is 98 percent success when an aneurysm is detected by testing and repaired through elective surgery.”*

— Martin G. Paul, M.D., chairman, department of surgery

### ARE YOU AT RISK?



- Are you a man older than 60?
- Do you have an immediate relative who had AAA?
- Do you have high blood pressure?
- Have you ever smoked?

These factors can put you at higher risk of an abdominal aortic aneurysm.

### WHAT SHOULD YOU DO?

- Ask your doctor if you may be at risk.
- Your doctor may prescribe an abdominal ultrasound or CT scan.
- If you are a candidate, Medicare covers a one-time screening.
- If an aneurysm of dangerous size is detected, elective surgery can be performed to repair it.

*Based on information from the Society for Vascular Surgery*

**i** To learn more  
[www.Sibley.org/emergency](http://www.Sibley.org/emergency)





Andrew Wolff, M.D., orthopedic surgeon, specializing in hip arthroscopy, hip preservation and sports medicine, Washington Orthopedics and Sports Medicine (WOSM).

# HIP REPAIR WITHOUT HIP REPLACEMENT

For people whose hip pain is not caused by arthritis, surgery to repair rather than replace the hip is increasingly common. Often these preservation procedures are performed as very minimally invasive outpatient surgeries. Andrew Wolff, M.D., specializes in these advanced arthroscopic techniques. “About 10 years ago, we began repairing hips through little incisions, as opposed to replacing hips through big incisions,” he notes. “We are able to relieve pain, prevent the hip from wearing out and needing to be replaced later, get people back to a normal daily life and let them resume sports and activities they’ve been missing.”

“My patient, Tom Whelley, is a classic case of the most common arthroscopic hip preservation surgery. His story is a great example of what can be accomplished with 2014 techniques and technology.”

Like many people with hip pain, the ball and socket of Whelley’s hip did not fit together perfectly. “We call this impingement,” Dr. Wolff explains. “It’s like a square peg in a

*“When problems are not caused by arthritis, new ways to repair and preserve hips can be very successful.”*

— Andrew Wolff, M.D., orthopedic surgeon,  
Washington Orthopedics and Sports Medicine (WOSM)

round hole. This puts extra pressure on the rim of the socket (the labrum), which is like a cartilage gasket seal encircling the socket. That pressure causes it to break down and tear away.”

“The arthroscopic procedure we perform corrects the damage that’s been caused and also corrects the cause of the damage,” says Dr. Wolff. He makes half-inch incisions around the hip and then re-contours the ball into a round shape that fits perfectly into the hip socket. Next, he repairs the torn rim and secures it onto the bone with suture anchors. Since the ball and socket are now a perfect match, the hip can heal and will not re-tear.

Recovery is faster and easier because arthroscopic surgery causes less trauma to the muscles around the hip. Since incisions are small, so are scars. Patients usually need pain medicine for just 24 hours, rather than days or weeks. “We get in, get out, fix the problem and send people home the same day,” Dr. Wolff notes.

*“I was in constant, mind-destroying pain for a year. I woke up from surgery and never felt the pain again.”*

— Tom Whelley, patient

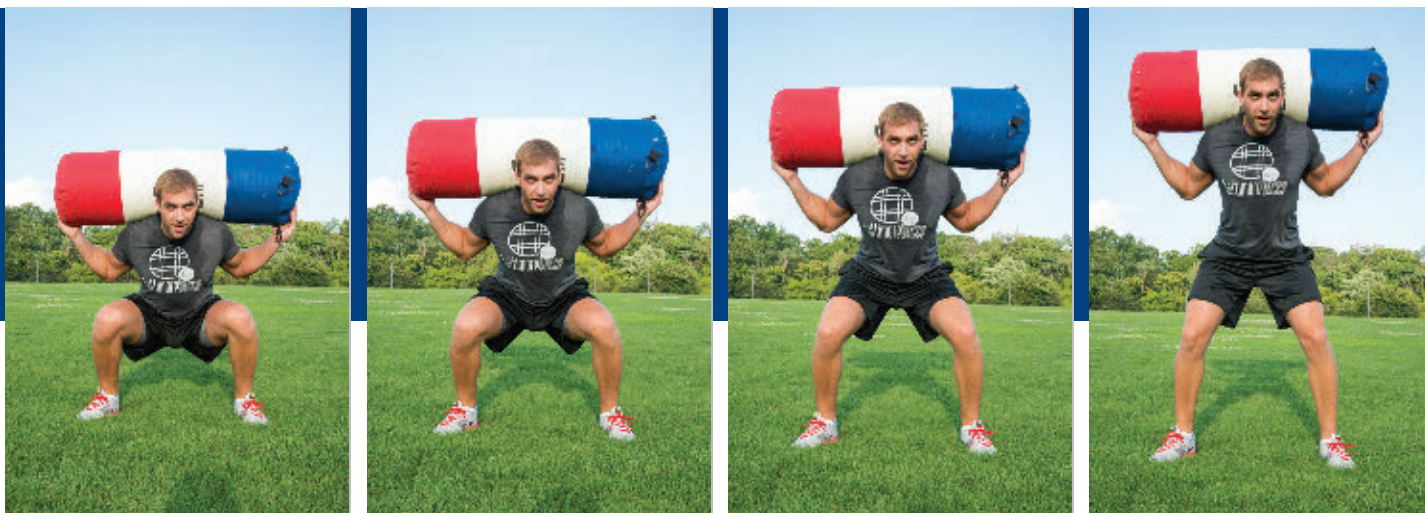
Dr. Wolff is contributing to research that seeks to identify what causes these problems. “Genetics play a role, and so do the sports you play between ages 12 and 17 when growth plates are closing and bone structure forms.

So you’re born with a risk factor, and then certain activities can increase the chance of damage.”



Andrew Wolff, M.D., and assistant, Alex Napoli, performing a hip ultrasound.

help locate the source of the pain. At my first appointment he developed a plan of injections, anti-inflammatory medications and physical therapy. When surgery did become necessary, I felt comfortable knowing we had exhausted other options and found the pain’s source. My hip bone was a little too big for the socket and had been grinding against the labrum for many years. My labrum wasn’t just torn, it was shredded.



Tom Whelley, patient, lifting a 100-pound weight after successful hip preservation surgery.

“My hip and back pain was huge...endless...blinding. I had to sleep on the floor and work standing up. I couldn’t sit in a car for more than 20 minutes and then climbing out took so long, I had to get to work early. The way I put on shoes and socks—well let’s just call it innovative. At 26, after years of competitive sports, weightlifting and running, I thought I might be in debilitating pain forever.

Surgeons couldn’t tell exactly where the pain was coming from, but they all wanted to operate immediately and ‘see what happens.’ That was unacceptable to me. I finally found Dr. Wolff, and he wanted to explore nonsurgical options first to

I woke up from the surgery pain-free and was home using an exercise bike that same night. The whole staff at Sibley was great, from check-in to recovery.

Four months later I was back to weight training and running. I’m in better shape now than ever. Plus, just being able to sleep in a bed, sit on a couch, get out of a car or even sneeze without excruciating pain are things I’ll never take for granted again. Everyone told me Dr. Wolff was the best and they were right. He hit it out of the park!”



To learn more  
[www.Sibley.org/orthopedics](http://www.Sibley.org/orthopedics)



# YOUR VOICE IS HEARD

## *The Patient and Family Advisory Council*



*Tom Reynolds, council member, doing patient rounds with Sue Belanger, director, education, training and research, and chair, ethics committee.*

How do patients and their families feel about Sibley programs, operations, facilities and plans for the future? Our Patient and Family Advisory Council uses their perspective to help develop and deliver the highest-quality patient-centered care.

The council is composed of Sibley clinical and non-clinical staff, physicians, patients and family members who collaborate to suggest ways to enhance programs, services and care. Director of patient relations and council facilitator, Marianne Monek, notes that, “Through these valuable personal insights, Sibley hears the voice of our patients.”

*“Honest, constructive feedback from patients and family members helps us constantly to improve and create a great patient experience.”*

— Marianne Monek, director of patient relations and volunteers and council facilitator

### Council Member Story

Tom Reynolds brings personal experience as both a Sibley patient and family member to his role as a council community representative. He has been treated for minor problems in the emergency department and had total hip replacement surgery at Sibley. His late wife had two surgeries at Sibley and spent the last five weeks of her life at the hospital. Reynolds found the Sibley Widowed Persons Outreach program helpful and became a member of its board. In 2013, he was asked to join the newly formed Patient and Family Advisory Council.

*“I want to have a positive impact on the experiences of others who come to Sibley.”*

— Tom Reynolds, patient and family advisory council community representative

“We want patients to know they are of value and concern, not only to those who directly care for them, but to everyone here at Sibley. Council members observe and gather feedback on everything, from the cleanliness of rooms to the way patient rounds are conducted to the quality of meals. We’ve created materials that explain the role of hospitalist physicians responsible for patient care decisions and developed a guide to clarify billing procedures. We address things as basic as hospital signage and as complex as enhancing end-of-life palliative care.

I think the hospital’s administration and board take information from the council very seriously. I’m truly impressed with my co-council members and the careful attention they bring to the table. Nothing is dismissed. We want to make sure every facet of the patient experience is as good as it can be. Anything—large or small—matters.”



# SIBLEY WELCOMES NEW CANCER SPECIALISTS



## **Matthias Holdhoff, M.D., assistant professor of oncology, neurosurgery and medicine**

**Medical Degree:** Freie Universität Berlin, Germany **Residency:** Johns Hopkins Bayview Medical Center  
**Fellowship:** The Johns Hopkins Hospital/Kimmel Cancer Center

Dr. Holdhoff is an assistant professor of oncology, neurosurgery and medicine at the Johns Hopkins University School of Medicine. He is board certified in medical oncology and internal medicine.

Dr. Holdhoff's focus is on clinical trials, translational biomarker research in primary brain cancers and cancers of the central nervous system.

Dr. Holdhoff's expertise includes:

- Brain cancer • Brain tumors • Medical oncology • Neuro-oncology

**Dr. Holdhoff sees patients in The Johns Hopkins Sidney Kimmel Cancer Center at Sibley, located in the Sibley Medical Building, Suite 340. For appointments, call 202-660-6500.**



## **Bruce Kressel, M.D., FACP, medical oncologist and hematologist**

**Medical Degree:** Tufts University School of Medicine **Residency:** The George Washington University Hospital

**Fellowships:** The George Washington University Hospital, Georgetown University Medical Center/  
The Lombardi Cancer Center

Dr. Kressel has more than 30 years of experience in clinical oncology and hematology in the Washington, D.C. area. He has been named a Top Doctor by *Washingtonian Magazine* for multiple years.

Dr. Kressel has served in various leadership roles, including chief of oncology and hematology at Sibley. He currently holds an appointment at the Johns Hopkins University School of Medicine.

Dr. Kressel's expertise includes:

- Lymphoma • Leukemia • Myeloma • Gynecological oncology

**Dr. Kressel sees patients in The Johns Hopkins Sidney Kimmel Cancer Center at Sibley, located in the Sibley Medical Building, Suite 340. For appointments, call 202-660-6500.**



## **Armine Smith, M.D., urologic oncologist**

**Medical Degree:** University of California, San Francisco **Residency:** Cleveland Clinic

**Fellowship:** National Cancer Institute

Dr. Smith is an assistant professor of urology at Johns Hopkins University and the director of Johns Hopkins urologic oncology at Sibley. She completed her urologic oncology fellowship at the National Cancer Institute, where she focused on personalized targeted therapies for bladder cancer. Dr. Smith is well versed in the latest research and breakthroughs in cancer care including, cutting-edge surgery and new imaging technology for cancer diagnosis.

Dr. Smith's expertise in urologic malignancies includes:

- Bladder • Prostate • Kidney • Adrenal • Testis • Penile

**Dr. Smith sees patients in the Johns Hopkins Community Physicians' office in the Sibley Medical Building, Suite 300. For appointments, call 443-367-4719.**

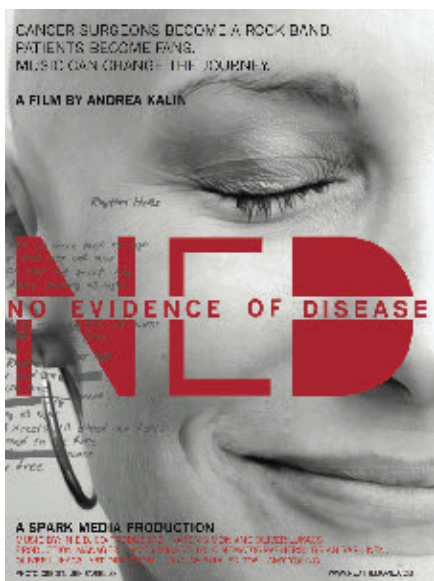
# FISCAL YEAR 2013 COMMUNITY BENEFIT REPORT

## SIBLEY ALIGNS WITH OTHER HEALTH ORGANIZATIONS

As part of the D.C. Healthy Communities Collaborative, Sibley joined other hospitals and health clinics in completing a 2013 community health needs assessment and improvement plan. Needs identified for the District of Columbia include sexual health, maternal and infant health, substance abuse, obesity and asthma. Working together to help move the health of the District forward, Sibley aligned with Providence Hospital, Howard University Hospital, Children’s National Medical Center, Bread for the City, Unity Health Care, Community of Hope and Mary’s Center.



*Presenters at the Ovarian Health: Knowledge Is Power seminar: Jeffrey Y. Lin, M.D., Mildred R. Chernofsky, M.D., Marilyn Jerome Foust, M.D., and Bruce Kressel, M.D.*



## CANCER EDUCATION AND SUPPORT PROGRAMS

Sibley provides free “Knowledge Is Power” community programs on breast, prostate and gynecologic health. Seminars feature multidisciplinary experts who discuss risk factors, prevention and the latest treatments. The Johns Hopkins Sidney Kimmel Comprehensive Cancer Center at Sibley hosted a screening of the film, *No Evidence of Disease*, followed by a discussion about health advocacy among the audience, a physician and a social worker. Examples of programs to help those facing a cancer diagnosis include support groups and education on healthy nutrition to reduce cancer risk.



*Jennie Tarica, R.N., Colette Magnant, M.D., Sheila Evans, R.N., and Vered Stearns, M.D., serving as medical volunteers at Avon Walk.*

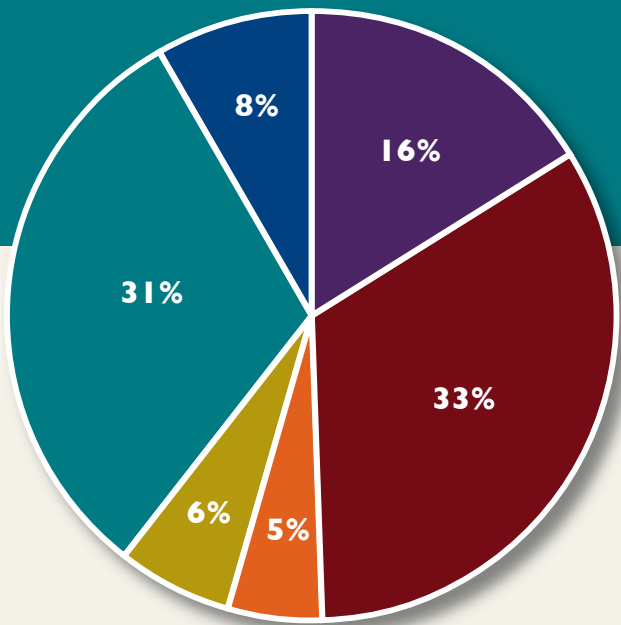


*Avon Walk medical crew volunteers.*



*Randall Lewis, M.D., presenting at an orthopedic seminar.*





### Community Benefit Dollars

<b>Charity Care at Cost</b>	<b>\$2,294,504</b>
<b>Unreimbursed Medicare</b>	<b>\$4,724,325</b>
<b>Community Health Improvement</b>	<b>\$724,477</b>
<b>Health Professions Education</b>	<b>\$863,970</b>
<b>Subsidized Health Services</b>	<b>\$4,409,653</b>
<b>Research</b>	<b>\$1,095,473</b>
<b>Cash and In Kind</b>	<b>\$47,951</b>
<b>Total</b>	<b>\$14,160,353</b>

### SIBLEY SERVING SENIORS

Sibley offers a wide range of programs for seniors, including health screenings, exercise classes, lectures, foreign language conversation groups and refresher courses for drivers age 50 and older. Ongoing support groups focus on Alzheimer's, arthritis, cardiac implant, dementia, macular degeneration, ostomy and Parkinson's disease. Sibley's Widowed Persons Outreach program provides support for those who are newly widowed. We now have 33 trained volunteers—men and women who have been widowed themselves—helping those in grief through support groups, social activities, one-on-one help, educational events and a newsletter.



To learn more and see our Community Health Needs Assessment online, visit [www.Sibley.org](http://www.Sibley.org)

## Construction Update



Construction of the New Sibley overlooking the green roof on the Radiation Oncology Center.

Progress on our New Sibley project is going so well that we have made up all the time lost last winter due to extreme cold and snow. Over the summer we successfully:

- Installed exterior elements, including brick and limestone, to the building facade
- Completed construction of all floors and topped out the concrete superstructure
- Installed mechanical infrastructure through an innovative process that improved quality and saved time by allowing electrical and plumbing components to be prefabricated

We look forward to opening the new emergency department in the spring of 2015.

**Watch us build the New Sibley at [webcam.sibley.org](http://webcam.sibley.org)**

# COMMUNITY HEALTH EDUCATION CALENDAR

Advance registration is required for most programs, classes and screenings. Call the phone number listed or go to [www.Sibley.org](http://www.Sibley.org) for more information and to register.

All programs are FREE, except as noted.

**JHSC:**

Johns Hopkins Health Care and Surgery Center  
6420 Rockledge Drive, Bethesda, MD

**SMH:**

Sibley Memorial Hospital  
5255 Loughboro Road, NW, Washington, DC

**SH:**

Suburban Hospital  
8600 Old Georgetown Road, Bethesda, MD

## Cancer Programs

### Meditation and Mindfulness: Practices to Help Regulate the Stress Response after a Cancer Diagnosis

**New Time! Tuesdays, 2 - 3 p.m., SMH, Renaissance Building, Conference Room 2**  
**Thursdays, 7-8 p.m., SMH, Medical Building, Conference Room 4**  
Join others affected by a cancer diagnosis in a mindfulness meditation session. Come learn ways to regulate the stress response, discover a deeper sense of ease and gain a greater sense of balance and intentional choice in your life. Open to all cancer survivors, family members and caregivers. Facilitated by Anne Gosling, Ph.D.  
*For more information, contact Pam Goetz at [pgoetz4@jhmi.edu](mailto:pgoetz4@jhmi.edu) or 202-243-2320.*

### Yoga for Women Cancer Survivors

**Mondays, 7 - 8:15 p.m., SMH (call for location)**  
**New Time! Wednesdays, 9:30 - 10:45 a.m., SMH, Renaissance Building, Conference Room 2**

Amy Dara Hochberg teaches weekly meditative, gentle and restorative yoga using mindful movement, balance and breathing techniques to help women with a history of cancer reduce anxiety, improve quality of life and regain sense of self. \$7 per class, scholarships available. Walk-ins welcome with cash/check, if space permits.  
*Register at [www.sibley.org/cancersupport](http://www.sibley.org/cancersupport) or contact Pam Goetz at [pgoetz4@jhmi.edu](mailto:pgoetz4@jhmi.edu) or 202-243-2320.*

### Surviving Survivorship: Living with Cancer—A Conference for Patients and Caregivers

**Saturday, October 11, Noon - 4 p.m., Marriott at BWI Airport**  
Join us for this annual conference designed to address your unique needs as a cancer survivor or family member. William Nelson, M.D., Ph.D., from Johns Hopkins, will present a future vision of cutting edge cancer treatment and research. Workshops will be offered on taming worry and anxiety, the challenges of caregiving, the art of thriving, survivorship from the physician's view, yoga, the needs of the spirit and restoring your self-image. Parking, lunch and the program are all provided at no cost.  
*Space is limited; register by October 1 with Barry Miller at 410-955-8934.*

### Knowledge Is Power: Breast Health Young Women and Breast Cancer: What You Need to Know

**Wednesday, October 15, 6:30 - 8:15 p.m., SMH, Medical Building, Conference Room 2**  
Join the Sullivan Breast Center care team for an educational program focused on the needs of young women diagnosed with breast cancer. Learn how the experts on your care team support you in getting the best treatment and help you to achieve a good quality of life as a young survivor. Presentations will include how the multidisciplinary team coordinates your care, addresses reproductive health issues, guides you in managing the psychological and social impact of a diagnosis, as well as information about genetics and family history and radiation and cardiac health. A panel of the care team will be available to answer questions. Light refreshments and free parking will be provided.  
*Register at [www.sibley.org/cancersupport](http://www.sibley.org/cancersupport) or contact Pam Goetz at 202-243-2320 or [pgoetz4@jhmi.edu](mailto:pgoetz4@jhmi.edu).*

### Principles of Immunotherapy in the Treatment of Prostate Cancer

**Monday, October 20, 7 - 8:30 p.m., SH**  
Join Ravi A. Madan, M.D., clinical director of the Genitourinary Malignancies Branch at the National Cancer Institute, to learn how this exciting new approach differs from other therapeutic interventions and how it can benefit patients.  
*Offered as part of the ongoing prostate cancer support group. For more information, call Susan Jacobstein at 301-896-6837.*

### 16th Annual "Living with Breast Cancer" Symposium: Making Healthy Choices

**Saturday, October 25, 8:30 a.m. - Noon, SH**  
After a diagnosis of breast cancer, many women decide to incorporate healthy eating, exercise and other changes into their lives. It can be difficult to know which recommendations are healthy and which are hype. Join cancer nutrition consultant Lynda McIntyre, R.D., L.D.; lymphedema specialist, Janet Sobel, and a Whole Foods healthy eating specialist, as they provide advice on strategies to help decrease the risk of recurrence, improve the immune system and optimize health. Open to all breast cancer survivors, family and friends. Breakfast will be provided.  
*Registration required; visit [events.suburbanhospital.org](http://events.suburbanhospital.org) or call 301-896-3939.*



### Yoga for Cancer Survivors

Wednesdays, November 5, 12, 19, December 3 & 10, 6:30 - 7:45 p.m., JHSC

Restore and refresh your body, mind and spirit in gently paced classes that enhance strength, flexibility and balance. Taught by Maggie Rhoades. Open to all cancer survivors. No prior yoga experience is necessary. \$30; scholarships available. *Registration required. Visit [events.suburbanhospital.org](http://events.suburbanhospital.org) or call 301-896-3939.*

### Skin Cancer Screening

Monday, November 3, 6 - 8 p.m., JHSC

Tuesday, November 4, 6 - 8 p.m., JHSC

The American Academy of Dermatology recommends that adults with significant past sun exposure or a family history of skin cancer should have an annual skin examination. Join board-certified dermatologists for one of these free screenings. Co-sponsored by the Sidney J. Malawer Memorial Foundation.

*Registration required. Visit*

*[events.suburbanhospital.org](http://events.suburbanhospital.org) or call 301-896-3939.*

### Eating Well After Cancer Treatment

Tuesday, November 11, 6 - 8 p.m., JHSC

After a diagnosis and treatment for cancer, many patients are interested in changing their dietary habits. Join Kristin Vorel, clinical dietician, for tips on better eating and a cooking demonstration. Be prepared to sample delicious, healthy dishes. Open to cancer survivors, family and friends.

*Registration required. Visit*

*[events.suburbanhospital.org](http://events.suburbanhospital.org) or call 301-896-3939.*

## Cancer Support Groups

### Facing Forward: A Post-Treatment Breast Cancer Support Group

Mondays, October 6, 13, 20 & 27, November 3 & 10, 5:30 - 7 p.m., JHSC

This six-week support group is designed to address the unique feelings and concerns that survivors face upon the completion of cancer treatment.

The group will be facilitated by Stephanie Stern, LCSW-C, oncology social worker. Open to women who have completed treatment within the past year.

*Registration required; call Susan Jacobstein at 301-896-6837.*

### Gynecologic Oncology Support Group

Tuesdays, October 14, November 11, and December 9, 2 - 3:30 p.m., SMH, Renaissance Building, Sullivan Breast Center Conference Room

Informal monthly gynecologic oncology support group designed for any GYN/Onc cancer survivor. The group provides a place where patients can meet others going through similar experiences and gain support and friendship. Facilitated by Liz Carrino-Tamasi, M.S.W., and Antoinette Solnik, R.N. *For more information and to register, please contact Liz Carrino-Tamasi at 202-243-2274.*

### Prostate Cancer Support Group

Mondays, October 20, November 17 and December 15, 7 - 8:30 p.m., SH

This ongoing, monthly support group is open to all prostate cancer patients, their families and friends. It provides an opportunity to gain new knowledge and share common concerns. Guest speakers alternate with informal discussions among participants.

*Drop-ins welcome; for information call Susan Jacobstein at 301-896-6837.*

### Women in Treatment for Breast Cancer Support Group

Wednesdays, October 8, November 12 and December 10, 6 - 8 p.m., SMH, Renaissance Building, Patient Care Services Conference Room

Sibley Hospital offers a group for women in treatment for breast cancer. You will have the opportunity to learn relaxation techniques, imagery and cognitive coping skills. Shared experiences are an important part of these sessions. The group is led by a licensed, independent clinical social worker.

*To register or for more information, contact Margie Stohner, LICSW, at 202-686-6335 or [mstoh@verizon.net](mailto:mstoh@verizon.net).*

### Young Adults with Cancer Support Group

Tuesdays, October 28, November 25, December 23, 4 - 5:30 p.m., SMH, Renaissance Building, Sullivan Breast Center Conference Room

Informal group designed for any cancer survivor in their 20s or 30s, which provides a place to meet others going through similar experiences and gain support and friendship. Facilitated by Liz Carrino-Tamasi, M.S.W.

*For more information and to register, please contact Liz Carrino-Tamasi at 202-243-2274.*

## Support Groups

### \*Alzheimer's Support Group

Wednesday, October 1, November 5 and December 3, 7:30 p.m.

### \*Arthritis Support Group

Friday, October 24, Noon

### \*Cardiac Implant Support

Meets Quarterly, 4:30 p.m.

### \*Club Memory (a supportive social group for persons with mild dementia and their care partners)

Wednesday, October 8 and 22, November 12 and 26, December 10 and 24, 1 p.m.

### \*Macular Degeneration Network

Saturday, October 11, November 8 and December 13, 10:30 a.m.

### \*Ostomy Support Group (for persons with an ostomy and their care partner)

Thursday, October 23, November 27, 1 p.m.

### \*Parkinson's Disease & Movement Disorders Support Group

Thursday, October 9, November 13 and December 11, 3 p.m.

**\*Seated Strength Training with Tonya**

Wednesdays, 1 p.m.

**\*New! Dance for Parkinson's**

Please call.

**\*Mind – Body Connection, Feldenkrais Awareness through Movement**

Thursdays, 11 a.m.

## Meditation

**\*Meditation and Mindfulness**

Tuesdays, 11 a.m.

Wednesdays, 4 p.m.

Thursdays, 2 p.m.

**\*Sponsored by the Sibley Senior Association. For more information and registration, please call 202-364-7602.**

## Childbirth and Parenting Classes

Expecting a baby is a very exciting time in your life! You probably have many questions related to the birth experience and many decisions to make as you prepare for your baby. Our childbirth education classes are designed to help you answer those questions and make some of your decisions easier. We offer a variety of classes to prepare expectant parents for their upcoming labor and delivery, breastfeeding and newborn care.

*For information on class selections, times, dates, locations and fees, visit [www.Sibley.org](http://www.Sibley.org). Registration is required for all classes and tours. For related inquiries, contact [childbirth@jhmi.edu](mailto:childbirth@jhmi.edu) or 202-537-4076.*

### Breastfeeding Support Group Mondays, Noon – 1 p.m., SMH, WIS, Conference Room

Free weekly support group for breastfeeding mothers and their babies. *Registration is encouraged but not required. For more information, contact [sibleylactation@jhmi.edu](mailto:sibleylactation@jhmi.edu) or 202-243-2321.*

## Diabetes Education Programs Provide Practical Tips

Sibley and Suburban Hospitals have joined forces to offer free education programs for people with diabetes and their families. Medical experts provide the most current information on how to successfully manage diabetes day-to-day and prevent long-term complications.

Monthly support groups provide a chance to share tips and learn about new self-management tools and techniques from health experts. Special pre-diabetes classes offer information on how simple behavior changes can help delay, prevent or reduce the risk of developing diabetes. Our bi-annual symposiums feature renowned speakers who cover the latest diabetes topics.

**For a complete list of upcoming programs, visit [www.Sibley.org](http://www.Sibley.org)**





## Sibley Ranks High in ‘Best Hospitals’ Rankings

The annual *U.S. News & World Report* Best Hospitals rankings have been announced and Sibley placed 11th out of 56 hospitals in the Washington D.C. metropolitan area. Suburban Hospital was also highly rated at 13th place. The Johns Hopkins Hospital holds third place among 4,743 hospitals in the United States and is number one in Maryland. Sibley was noted as a top performer in orthopedics and urology, and Suburban was ranked as a top performer in orthopedics.

## Sibley Stroke Care Earns Quality Award

Sibley has received the *Get With the Guidelines*® Stroke Gold-Plus Quality Achievement Award. The honor recognizes our Stroke Center’s rapid diagnosis and treatment of stroke patients based on specific quality measures outlined by the American Heart Association/American Stroke Association. Sibley’s stroke team earned the award by meeting the most up-to-date, evidence-based guidelines to speed recovery, reduce death and disability and improve the lives of our stroke patients.



## Sibley Chimes in to Celebrate New Babies!

New life is in the air! When a baby is born at Sibley, a cheerful three-second chime sounds throughout the hospital. This popular new feature can be heard between 8 a.m. and 8 p.m.

**Congratulations, new families!**

## It’s Time for Your Flu Shot

Flu season is coming up, and the single best way to protect yourself is with a flu shot. According to the Centers for Disease Control and Prevention, all types of flu vaccines are effective—the important thing is to receive a shot every year. Ideally, you should be vaccinated by October, when seasonal flu outbreaks usually begin. It takes your body about two weeks after vaccination to develop antibodies that protect against the virus, so get your flu-fighting shot now!



# SIBLEY MEMORIAL HOSPITAL

JOHNS HOPKINS MEDICINE

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## YOUNG PROFESSIONALS MAKING A DIFFERENCE!

In 2012, the Sibley Hospital Foundation established the young professionals board, a branch of the foundation board of trustees that raises money and awareness for Sibley. This energetic board of 17 young professionals, led by chair Austin Branson, has raised more than \$110,000.

Last fall, through generous donors, they were able to accomplish their first project: establishing a young adults with cancer support program to help Sibley's youngest oncology patients. Through their "Sibley Soirée" fundraising event held in June, they raised over \$60,000 in support of the special care nursery.

The young professionals board was able to surpass their fundraising goals thanks to the generosity of sponsors, including lead sponsors The Brawner Companies and Smathers & Branson. Thanks also to silver sponsors Adfero, The Andrews-Balboa Wealth Management Group, Bank of Georgetown, Billings Capital Management, Douglass Winthrop Advisors, Newmark Grubb Knight Frank, Sivan Properties, The Steed Family and Total Wine & More.

The money that was raised is already at work. This summer, nurses in the special care nursery received neonatal specialty certification, ensuring that they have the training to provide



Staff from Sibley's special care nursery. Back row L to R: Joanna Carmona, OB tech/SA, Svetlana Ilyushko, M.D., neonatologist, Pauline Solomita, R.N., nurse manager and Laaree Novak, R.N. Front row: Janelle Rhoderick, R.N., Shannon Kelley, R.N., Katherine Fleming, R.N., Mary Stech, R.N.

the best care for our tiniest patients. Plans to purchase new equipment are also underway. "We are so grateful to the young professionals board for their dedication to raise needed funds for Sibley and promote Sibley Hospital in the community," said Michael Farr, chairman of the foundation's board of trustees.



**For more information or to support the young professionals board's efforts, contact Arlene Snyder at [asnyder@jhmi.edu](mailto:asnyder@jhmi.edu) or 202-537-4257.**