Stay Well This Summer!

Common Women’s Health Issues and Disease Prevention

HOWARD COUNTY GENERAL HOSPITAL
JOHNS HOPKINS MEDICINE
President’s Message

Dear Friends,

I want to take this opportunity to thank you for the warm welcome you have extended to me as I assume the role of President of Howard County General Hospital. I have spent the last few months discovering HCGH and our partner, Johns Hopkins Medicine, and am overwhelmed by the tremendous resources afforded to the hospital as well as the incredible staff.

The coming months will continue to be a time of learning for me as I dive deeper into the community and hospital needs. As health care continues to evolve and change, strengthening the partnership between HCGH, our physicians and the community to instill healthy behaviors will be vital. Together, I know we can create an even healthier Howard County.

Inside our hospital walls, I will assess our quality, safety and patient satisfaction scores because I believe, no matter how good we think we are, we can always do better. I am excited to work with the physicians, staff and community to build on the foundation that has made HCGH the hospital it is today.

I look forward to meeting our community members as my family and I make Howard County home.

Sincerely,

Steven C. Snelgrove
President

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Wellness Matters is published by Howard County General Hospital, a private, not-for-profit, health care provider, and a member of Johns Hopkins Medicine. Your physician should be consulted in regard to matters concerning the medical condition, treatment and needs of your family.

Please direct comments regarding Wellness Matters to 410-740-7810. Hospital Information: 410-740-7890
Women & Heart Disease

Fighting the #1 Killer of Women in the United States

According to the National Heart, Lung and Blood Institute (NHLBI), one in four U.S. women dies from heart disease. Coronary heart disease, or atherosclerotic cardiovascular disease, occurs when plaque builds up in artery walls, narrowing them and making it harder for blood to flow through. If a blood clot forms, the blood flow can stop and cause a heart attack.

Signs and Symptoms

“Women tend to think of themselves as caregivers, but they also need to be care getters,” stresses Lili Barouch, M.D., a Johns Hopkins cardiologist on staff at HCGH. “Women should not ignore their symptoms, even if they don’t seem typical, because women with heart disease get a wider variety of symptoms than men. Although ‘classic’ heart disease symptoms include chest pain radiating down the left arm at rest or with exercise, women may only experience more atypical types of chest discomfort such as squeezing, burning or tightness, or even have no chest discomfort at all. Their ‘chest pain’ may feel like indigestion or acid reflux, nausea, cold sweats, or they may only have shortness of breath. Women and men with diabetes often do not experience chest pain due to diabetic nerve damage; rather, they may just feel short of breath, nauseous and sweaty. If you aren’t sure, or if you sense something is wrong, see your doctor.”

Lili Barouch, M.D.

is a cardiologist with Johns Hopkins Cardiology in Columbia.

Appointments: 410-964-5303
Risk Factors

“In general, women have the same risk factors as men, but they may affect women differently from men,” says Dr. Barouch. “There are several risk factors for heart disease—including those you can’t control and those you can.”

- Age and menopause. Estrogen provides women with some protection before menopause, so women who are 55 and younger have a lower risk compared to men. However, the risk for heart disease increases in both men and women after 55. Women who undergo early menopause (before age 46) are at an increased risk.
- Family history. Your risk for heart disease increases if your father or a brother was diagnosed with heart disease before 55 or if your mother or a sister was diagnosed with heart disease before 65. A family history of stroke—especially a mother’s stroke history—also can help predict the heart attack risk in women.
- Preeclampsia during pregnancy, which occurs when women have a rise in blood pressure and excess protein in the urine.
- Smoking
- High cholesterol and triglyceride levels
- High blood pressure
- Diabetes/pre-diabetes
- Overweight/obesity
- Birth control pills
- Physical inactivity
- Unhealthy diet
- Stress/depression
- Sleep apnea

Weighing In on What Matters Most

“It is more important to be fit than thin. Even if you don’t lose weight, exercise improves cardiac efficiency and lowers blood pressure, blood sugar and cholesterol,” says Dr. Barouch. “Start by exercising at least three days a week and see what you can do comfortably. Don’t push yourself to exhaustion, or you will not sustain it. Pick a moderate exercise that you enjoy; once it becomes a habit, increase your time until you get to the goal of 30 minutes or more of exercise each day.”

According to NBLHI, inactive people are nearly twice as likely to develop heart disease compared to those who are physically active. In addition, a lack of physical activity can worsen other heart disease risk factors.
Q: What are the types of urinary incontinence?
There are several different types of incontinence. It is important to distinguish what type of leakage you have as treatments vary greatly.
- **Stress**—loss of urine during laughing, coughing, sneezing or exercise
- **Urge**—inability to delay urination that results in leakage
- **Overflow**—when the bladder does not empty

Q: What are the risk factors for incontinence?
Risk factors include age; menopausal status; weight; the number of children you have had and if you have had larger babies; pelvic radiation or pelvic surgery. A family history of incontinence also may be a risk factor.

Q: When should I see a doctor for urinary incontinence/leaking?
You do not have to “live” with incontinence. If it is affecting your quality of life, talk to your doctor so you can weigh the various treatment options. Depending on the cause, your leakage can be treated with diet, exercise and behavioral changes. Your physician also can review if medication may help.

Q: What can I do to reduce my symptoms?
For stress incontinence, do pelvic floor exercises in addition to your regular exercise routine. For urge incontinence, avoid foods and drinks that irritate the bladder: coffee, tea, juice, soda (even decaf), acidic fruits, spicy foods and artificial sweeteners.

Q: What treatment options are available?
Options for stress incontinence include pelvic floor physical therapy, conservative measures or surgery using a device or sling. If behavioral and dietary changes do not improve urge incontinence, your physician may suggest injectable medications or utilizing a “bladder pacemaker” approved to treat certain incontinence conditions.

Q: Are injectable medications an option for me?
The FDA has approved injectable medications for use on some patients with incontinence issues. Performed with sedation or local anesthesia, the injection needs to be repeated every 6 to 10 months. Side effects may include urinary tract infections or the inability to urinate.

Q: What is a bladder pacemaker?
This is an implanted device that is done as a staged procedure. During the testing phase, the nerves that supply the bladder are stimulated and monitored for response, prior to placing the battery. It is an excellent long-term option for many patients who cannot tolerate or respond to overactive bladder medications.

Q: Is a sling safe?
In 2013, the FDA stated that “the safety and effectiveness of multi-incision slings is well-established in clinical trials.” While the sling has a success rate of 80 percent, you always should review the risks and benefits of any procedure with your surgeon. Also, be aware that it is not an advisable treatment for every woman.
It was the pressure in her back, neck and shoulders that caused Teresa Spikes-Hamilton so much discomfort. The cause? The size of her breasts – DDD. “I had to wear several layers of clothes and sometimes a girdle to help support myself,” says Teresa.

In April 2013, Teresa underwent breast reduction surgery at HCGH to decrease the size of her breasts to a D cup. Today, she is pain free.

What is Breast Reduction Surgery?
Breast reduction is the surgical removal of excess breast fat, glandular tissue and skin to achieve a proportional breast size for your body as well as to alleviate discomfort due to overly large breasts.

“The weight of excess breast tissue can impact your ability to live an active lifestyle,” explains Teresa’s doctor, Eric Chang, M.D., a board-certified plastic surgeon on staff at HCGH. “These women often battle with self-consciousness and physical discomfort and pain.”

How is it Performed?
The exact technique to reduce your breast size will depend on a variety of factors including breast composition, the desired amount of reduction and your personal preferences. “Everyone is different, but, for most patients, this is an outpatient procedure done under general anesthesia in about three hours,” says Dr. Chang. “While you can see the results immediately, you will have post-surgical swelling that goes away. The surgery does leave scars around the nipple and/or under the breast. However, these usually will be hidden by a swimsuit or bra and often fade and improve over time.”
Recovery
According to Dr. Chang, patients typically have a two- to three-week recovery and can return to the gym after six weeks. “As the surgery involves repositioning the areola, some patients may lose sensation in the nipple,” notes Dr. Chang. “As with any surgical procedure, you should review all risks and benefits with your physician.”

Is it Right for Me?
“The decision to undergo breast reduction surgery is highly personal,” stresses Dr. Chang. “Do it for yourself and not as a means to fulfill someone else’s desires or fit any sort of ideal body image. Talk with your doctor to determine if the procedure will achieve your goals.”

According to Dr. Chang, breast reduction may be advisable if:
- You don’t smoke.
- Your breasts are too large or limit your physical activity.
- You have back/neck/shoulder pain.
- You have shoulder grooves from bra straps and/or skin rashes beneath your breast crease.
- You have low-hanging breasts and stretched skin including enlarged areolas.

“Patients often ask if they should lose weight before having surgery,” says Dr. Chang. “In a perfect world, you want to get as close as you can to your ideal weight. However, overly large breasts present a catch-22 for many women; they can’t exercise because of their breast size.”

“After recovering from the surgery, I went jogging – something I could not do before. I could actually fit into a regular sports bra and work out without pain.”

- Teresa Spikes-Hamilton

“Following surgery, patients often are able to do things they couldn’t do before. They feel better about how they look, and surgery kick-starts a total body improvement,” says Dr. Chang. “There are a lot of women who for some reason aren’t doing this, but the first thing a woman in her 60s often tells me after surgery is: ‘I don’t know why this took me so long!’”

“Besides feeling so much better, I’m saving money because I don’t have to purchase special-size expensive bras!” says Teresa. “I feel as if a weight has truly been lifted off me in so many ways.”

Common Questions
Q: Can you breastfeed after having this surgery?
A: There is a misperception that this procedure makes the breast nonfunctional. The nipples maintain their attachment to the ducts in most cases. Current data shows that about 85 percent of women who would otherwise be able to breastfeed will be able to do so after surgery.

Q: Is it covered by insurance?
A: This depends on the insurance company and the severity of the problem. Many insurance companies require documentation of the functional problems and pain you are experiencing before making a decision.
UTERINE FIBROIDS
Understanding what they are, their symptoms and treatment options

If you have:

- Seven or more days of menstrual bleeding
- Heavy menstrual bleeding or clots
- More frequent menstrual cycles
- Frequent urination
- Trouble emptying your bladder
- Pelvic pressure/pain
- Constipation

According to Michelle Seavey, M.D., an OB/GYN on staff at HCGH, these are the most common symptoms of uterine fibroids.

What are Uterine Fibroids?
Uterine fibroids are typically noncancerous growths of the uterus that usually appear during your childbearing years. “They can vary greatly in size—from undetectable to the human eye to masses that enlarge your uterus. You can have just one or many, and they can grow quickly, slowly or stay the same size,” explains Melinda Afzal, D.O., an OB/GYN on staff at HCGH. “They also can enlarge during pregnancy and then shrink after pregnancy as your uterus returns to its normal size.”

What are the Symptoms?
“At least 60 to 70 percent of women will get fibroids at some point, however most women are unaware they have fibroids because they have no symptoms,” states Dr. Afzal. “Typically, fibroids are found incidentally during a routine pelvic exam. If your doctor feels irregularities in your uterus’ shape, he or she may suggest a pelvic ultrasound—the gold standard for diagnosis.”
How are They Treated?

“When most women find out they have fibroids, they are concerned and think the fibroids need to be removed. If you have a small fibroid and are not experiencing any symptoms, we will follow it at your annual visits. If you have a larger fibroid, we may monitor you every six months to see size change,” states Dr. Seavey.

“Fibroids are not associated with an increased risk of uterine cancer. However, there are many options for treating uterine fibroids, and treatment recommendations depend on the severity of symptoms and the size and number of fibroids. If you have symptoms, talk with your doctor to determine which option is best for you.”

- Michelle Seavey, M.D.

- **Medications.** An injection that blocks the production of estrogen and progesterone, creating a temporary postmenopausal state that lasts three to six months, can shrink the fibroid’s size. “Hormone therapy, in the form of oral contraceptives, can help control menstrual bleeding but will not reduce fibroid size,” notes Dr. Seavey.

- **Minimally Invasive Procedures.** “Uterine artery embolization uses a small device that is placed in the major blood vessel that supplies the uterus with blood to reduce the blood supply to the fibroid, causing it to shrink,” says Dr. Seavey. “This technique can be used depending on the size and location of the fibroid.”

- **Hysterectomy (the surgical removal of the uterus).** “Depending on fibroid size, a hysterectomy can be performed laparoscopically with three to four small abdominal incisions and typically a one-day recovery in the hospital,” explains Dr. Afzal. “Patients who require an open hysterectomy typically have a three-day hospital stay and another four to six weeks for recovery after the procedure.” While a hysterectomy is not an option for those still wanting to bear children, it remains the only proven permanent solution for fibroids.

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**Seminar:**

**Understanding Fibroids**

Gynecologist Phyllis Campbell, M.D., will discuss the symptoms, when treatment is appropriate and what treatments are available. **6/19, 7–8:30 p.m. HCGH Wellness Center. Free. Register: hcgh.org**

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**These HCGH physicians have recently relocated or established new offices in Howard County.**

**OBSTETRICS AND GYNECOLOGY**

Melinda Afzal, D.O.
Johns Hopkins Community Physicians
6350 Stevens Forest Road, #105
Columbia, MD 21046
443-367-4700

**FAMILY MEDICINE**

Bonnie Catalano, D.O.
Columbia Medical Practice
5450 Knoll North Drive, #250
Columbia, MD 21045
410-964-6200

Lawrence Swink, M.D.
Columbia Medical Practice
5450 Knoll North Drive, #250
Columbia, MD 21045
410-964-6200
Recognizing the Signs

Domestic violence and abuse occurs when one person in an intimate relationship uses fear, guilt, shame, intimidation and/or physical violence to dominate and control the other person. This type of violence and abuse occurs within all age ranges, ethnic backgrounds and economic levels. Unfortunately, domestic violence is frequently overlooked, excused or denied. The first step in taking a stand is recognizing the abuse.

Does your partner:
- Control what you do, who you see and where you go?
- Blame you for his/her abusive behavior?
- Have a bad, unpredictable temper?
- Hurt you or threaten to hurt/kill you?

Do you:
- Feel afraid of your partner?
- Avoid certain topics so as not to anger your partner?
- Feel embarrassed for your friends/family to see how poorly your partner treats you?
- Believe you deserve to be hurt or mistreated?

If you answered yes to these questions, you may be in an abusive relationship. Resources are available 24 hours a day at wearehopeworks.org or by calling 410-997-2272.

HCGH, in partnership with HopeWorks (previously the Domestic Violence Center of Howard County), has launched a new hospital-based Domestic Violence Program. The hospital employs a domestic violence coordinator to train its nurses and other care providers to improve identification, follow-up care and referrals for victims of domestic violence. The coordinator works closely with HopeWorks staff members who will meet patients in the hospital, transport them to emergency shelters as needed and follow up with legal and/or counseling service.

Howard Hospital Foundation (HHF) secured a donation from Hamel Builders to support program costs. Hamel Builders, based in Elkridge, is a multi-family residential, affordable housing, adaptive reuse, senior living, historic and mixed-use developer.

Ed Hamel, chairman of Hamel Builders, a long-time Howard County resident, believes in supporting the local community and has incorporated this philosophy into his company’s core values to “do the right thing” and engage in “actions that set us apart.”

“Supporting this initiative for domestic violence victims is good for our county, and it fits with our commitment to philanthropy,” said Mr. Hamel. “Throughout the years, we’ve supported the golf tournament, and we felt that helping to fund this important program would make an immediate and lasting impact on people who need assistance.”

Jan Hines, director of development for the HHF, agrees. “While the hospital has served as Howard County’s designated site for sexual assault forensic examinations since 1999, we recognized the opportunity to enhance care to victims of domestic violence through this hospital-based domestic violence program.”

According to the American Medical Association, battered patients often present with repeated injuries, medical complaints and mental health problems. Health care professionals may be the first, and sometimes only, professionals a victim of abuse turns to for help; therefore, health care settings have a unique opportunity to identify and assist victims through screening and education, documentation and intervention.

Hamel Builders Helps HCGH Support Domestic Violence Victims
In recognition of past hospital Board of Trustees Chair George Doetsch’s leadership and support of HCGH, the hospital recently purchased new speech biofeedback and voice treatment equipment for the Rehabilitation Services Department.

George, a former speech-language patient at HCGH, came to the hospital in 2005 barely able to speak after suffering a stroke. Having spent countless hours regaining his speech with the help of HCGH, he knows too well the importance of having state-of-the-art technology at his community hospital.

“I am truly honored that the hospital purchased this specialized speech equipment and made the dedication in my name,” said George. “Being able to speak and articulate clearly is vital to my career as an automobile dealer as well as facilitating my interactions with the many community boards on which I serve. Today, I am at a point in my rehabilitation which is nearly 100 percent of my pre-stroke level. I can only imagine the countless individuals who will benefit from this technology in the years to come.”

Feedback in Real Time
Speech biofeedback equipment records pitch and volume information from the patient during exercises and provides feedback in real time, giving patients a visual display of their progress. Monitoring important speech/voice behaviors with concrete visual displays helps patients reach therapy goals more easily.

“Patients love the equipment because it’s interactive and can be used as a game,” says Dorinda Jacob, a speech-language pathologist (SLP) at HCGH. “They manipulate the equipment with their own voices and can immediately see their results.”

Voice Treatment Program
The new Parkinson Voice Treatment Program provides the SLPs at HCGH with sound wave measurement and analysis to assist them in initial voice assessments and treatment with the goal of building strength in the vocal cords.

Jack Nash, an HCGH patient with Parkinson’s disease, is very pleased with his outcome. “Dorinda found creative ways to help me through the voice strengthening and measure my progress,” said Jack. “I could see for myself that my voice was improving.”

Jack’s wife, Barbara, noted that Jack had always loved to sing, but the Parkinson’s had affected his singing. After his voice treatments, she gave him a karaoke machine as a unique and fun way to aid his recovery. “The karaoke singing has helped Jack continue to strengthen his voice,” said Barbara.
Our Best Fed Beginnings Initiative

Breastfeeding is a wonderful way to provide babies with a healthy start in life. HCGH promotes and supports breastfeeding and the long-term health of mothers and babies through its involvement in the Best Fed Beginnings initiative, a nationwide quality improvement program to help hospitals improve maternity care and encourage exclusive breastfeeding.

We offer new mothers a wealth of education and support resources for breastfeeding before and after baby is born, including prenatal breastfeeding classes, online breastfeeding education and new mom support groups. Nurses and lactation consultants support new mothers in successful, exclusive breastfeeding, including skin-to-skin contact, rooming-in and individualized breastfeeding support. For mothers who choose to formula feed their babies, we offer the same support, as well as information about safe formula preparation. While in the hospital, formula is provided for mothers who choose to formula feed, as well as mothers who have a medical need for supplementation. Our caring staff is here to answer any questions you may have when it comes to feeding your baby.

HCGH Wants to Be Baby-Friendly!

As we work toward the “Baby-Friendly” (BF) designation, HCGH is taking a new approach to obstetrical patient care. The ultimate goal of BF is to have as little separation between mother and baby as possible. In the past, HCGH has staffed a traditional nursery; once a baby was born, he/she was transferred to the nursery, sometimes for hours. After the mother was transferred to the maternity unit to recover, the baby was then brought to her room. Babies often were sent to the nursery so that pediatricians could examine them and tests could be done. Studies have shown that there are many more benefits for mother, baby and family if the baby remains in the room with the mother.

In keeping with the goal of increasing mother/baby time, the Howard Hospital Foundation is working to secure funding to purchase portable newborn hearing screening equipment so that the required hearing test can be done in the mother’s room.

“This more advanced, portable machine would improve the efficiency of the procedure and deliver an accurate result in a short amount of time,” says Tuvia Blechman, M.D., chief of Neonatology and chairman of the Department of Pediatrics at HCGH. “With the machine being brought to the room, the mother and baby can continue bonding, which is very important early in life.”

We are asking for the community’s support to purchase the new machine. If you are interested in making a donation toward this purchase, please contact the Howard Hospital Foundation at 410-740-7840 or hcgh.org/give. Thank you for your support as we seek a Baby-Friendly designation!
A New Look Coming Soon

To accommodate the continued significant increase in the number of births at HCGH, plans are currently underway to once again expand the Women and Children's Services Department, including:

- Increasing the number of post-anesthesia rooms to support the increased use of the Labor and Delivery operating rooms, which is a reflection of the increase in births;
- Adding rooms to the unit for pregnant women experiencing concerns before delivery. These rooms will be used to monitor the health of both mom and the fetus and also can be used as delivery rooms if necessary;
- Increasing and enlarging the number of rooms used to assess expectant mothers upon arrival to the unit. This will reduce the wait time for moms to be admitted to a private labor and delivery room; and
- Relocating the Labor and Delivery waiting room to the front of the unit, with a welcoming area. This will provide patients and visitors with immediate access to a staff member upon arrival to the unit.

These renovations will help ease the pressure of the increase in the number of deliveries, which are projected to continue to grow; provide patients with a warm and inviting environment and support the needs of our physicians.

Howard Hospital Foundation is raising funds to support this effort. Naming opportunities for donors will be available throughout the Labor and Delivery Unit. If you are interested in making a donation toward this effort, please contact the Howard Hospital Foundation at 410-740-7840 or hcgh.org/give.

A Prescription for Philanthropy

When George Huber retired from serving as the director of pharmacy for another Maryland hospital in 1993, he was offered the opportunity to work part time at HCGH. “I thought maybe I would stay a year or two,” recalled George, who will celebrate his 21st anniversary with HCGH in April. “I enjoy the hospital, and I like all the people I work with. Working in the pharmacy keeps me and my mind active.”

This positive experience paved the way for George to establish a bequest in his will that is set to specifically benefit HCGH’s NICU. “The hospital has gained a reputation for helping women with high-risk pregnancies, so that unit is always busy,” commented George, who often works with the NICU preparing medicine. “I know that the money given to HCGH through my bequest will be well spent on services or equipment and meeting the needs of NICU patients and their families.”

Having worked at HCGH for so many years, George has seen the impact HCGH makes. “In my opinion, personal care is just as important to your recovery as having the best doctor, and HCGH provides both,” says George. For George, this personalized care continued through the Howard Hospital Foundation, which worked directly with his lawyer to ensure the wishes outlined in his will are carried out.

To learn how you can join George in supporting HCGH now and for years to come through planned giving, contact the foundation at 410-740-7840 or HCGH-Foundation@jhmi.edu.
**Wellness Classes**

Registration advised for all programs – visit hcgh.org

### SPECIAL EVENTS

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<tr>
<th>Event Description</th>
<th>Date(s)</th>
<th>Time</th>
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<tbody>
<tr>
<td>Managing Incontinence with Confidence</td>
<td>6/4</td>
<td>6:30–8 p.m.</td>
<td>Free</td>
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<tr>
<td>Understanding Fibroids</td>
<td>6/19</td>
<td>7–8:30 p.m.</td>
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### GET HEALTHY WITH DIET & EXERCISE

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<th>Event Description</th>
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<tr>
<td>The Healthy Weight Connection</td>
<td>9/16-11/6,</td>
<td>6:30–8 p.m.</td>
<td>$195.</td>
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<td>Weight Loss Through Bariatric Surgery</td>
<td>6/10, 7/15,</td>
<td>5–6:30 p.m.</td>
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<td>8/13,</td>
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<td>Dietary Counseling</td>
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### HEALTHY HEART & LUNGS

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<tr>
<td>Adult/Child/Infant CPR and AED</td>
<td>6/9, 6/24, 7/10, 7/28, 8/13</td>
<td>5:30–9 p.m.</td>
<td>$55.</td>
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<td>Smoke Free Lungs</td>
<td>6/10</td>
<td>7–9 p.m.</td>
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<td>Cardiac Rehabilitation Program</td>
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<td>Cardiac Rehabilitation Maintenance</td>
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<tr>
<td>Pulmonary Rehabilitation</td>
<td>443-718-3000</td>
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<tr>
<td>Pulmonary Rehabilitation Maintenance</td>
<td>443-718-3000</td>
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<td>$60 per month</td>
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<tr>
<td>External Enhanced Counterpulsation Therapy</td>
<td>443-718-3000</td>
<td></td>
<td></td>
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<tr>
<td>Blood Pressure Screening and Monitoring</td>
<td>410-740-7601</td>
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**The Mall Milers**
Walk-for-health program at The Mall in Columbia.
Blood pressure screenings on the second Tuesday of the month. 410-730-3300. Free.

**Cardiac Rehabilitation Maintenance**
Exercise for cardiac rehab program graduates. Tuesdays and Fridays, 8 a.m. or 9:30 a.m. 443-718-3000. $60 per month.

**Pulmonary Rehabilitation**
Exercise and education to assist patients with lung disease. 443-718-3000.

**Pulmonary Rehabilitation Maintenance**
Exercise maintenance for pulmonary rehab program graduates. Tuesday and Friday afternoons. 443-718-3000. $60 per month.

**External Enhanced Counterpulsation Therapy**
Non-invasive alternative treatment for patients with stage III or IV angina. 443-718-3000.

**Blood Pressure Screening and Monitoring**
For times and locations: hcgh.org or call 410-740-7601. Free.
IMPROVING WITH AGE

AARP Driver Safety
Classroom refresher for ages 50+. 6/30, 10 a.m.–2 p.m. $15/AARP members, $20/others.

Medicare 101
Learn about Original Medicare (Parts A and B) and Prescription Drug coverage (Part D). Presented by the State Health Insurance Assistance Program, Howard County Office on Aging. 6/9, 10–11:30 a.m. Free.

Medicare 102
Learn about Medicare Health Plans (Part C) and Medicare Supplement Policies. Presented by the State Health Insurance Assistance Program, Howard County Office on Aging. 6/16, 10–11:30 a.m. Free.

Fitness Fun for Seniors
Individuals age 60 and older exercise at their own pace. Includes stretching and low-impact exercise. Mondays and Wednesdays, 9:30–10:30 a.m. $32/8-week sessions.

HEALTHY FAMILIES

Prenatal Class for Early Pregnancy
Parents-to-be and parents in the first trimester will learn about the early stages of pregnancy including your body’s physical changes, your baby’s growth and easy ways to promote a healthier pregnancy. 7/9, 7–9 p.m. Free.

Happiest Baby on the Block
Parents and parents-to-be learn techniques to quickly soothe the baby. 7/16, 7–9 p.m. $50 per couple (includes parent kits).

Prenatal Exercise
Taught by a certified instructor. Physician permission required. Eight-week session, Wednesdays, 9/17–11/5, 6:30–7:30 p.m. $88/eight sessions.

FOR CHILDREN & TEENS

Essentials in Babysitting
Learn to manage children, create a safe environment, and apply basic emergency techniques. 5/17, 6/21, 7/12, 8/16, 9 a.m.–1 p.m. $50.

Home Sweet Home
Children (8–12) and their parents learn fun and safe ways for children to stay at home alone. 7/26, 9–11 a.m. Free.

FREE SCREENING

Stroke Assessment with BMI and Diabetes Screening
Meet with a registered nurse to receive a diabetes/stroke screening that includes a blood glucose test, blood pressure screening, BMI (body mass index) measurement, stroke risk assessment and weight management information. Immediate results. Fasting eight hours prior to test is recommended. 6/5, 9–11:30 a.m. Free.

Skin Cancer
Dermatologist will examine one or two areas of concern. 5/13 & 15, 5–7 p.m. Free.

REGISTRATION

hcgh.org—online registration
410-740-7601—information
410-740-7750—physician referral
410-740-7990—TDD

Advance registration is advised for all programs unless noted. Payment due at registration. A $25 cancellation fee will be applied to cancellations made less than one week before class. Refunds will not be given less than 24 hours before class starts. For cancellations due to low enrollment, full refund will be issued.

Unless noted, all classes are held at HCGH Wellness Center 10710 Charter Drive, Suite 100, Columbia, MD 21044

Summer 2014 Wellness Matters 14
MAY

Farmers Market
Fridays, May 9 to October 31/2–6 p.m.
Stop by the rear of HCGH Visitor Lot C to purchase farm-fresh produce.

JUNE

Howard County Family Wellness Day
Sunday, June 1/10 a.m.–3 p.m.
Centennial Park
Free
Promotes physical activity and a healthy lifestyle while highlighting the many activities and programs available that support wellness.
www.wepromotehealth.org

24th Annual Benefit Golf Classic
Monday, June 2/10:30 a.m.
Cattail Creek Country Club, Glenwood, MD
Registration: 8 a.m. and 2 p.m. shotgun starts
All proceeds from our Annual Benefit Golf Classic will benefit HCGH.
Register now to secure your tee time by calling Howard Hospital Foundation at 410-720-8706 or visit hcgh.org/benefitgolfclassic.

Relay for Life of Howard County
June 6/6:30 p.m.
Long Reach High School

3rd Annual Power of the Purse
Tuesday, June 10/4:30–7:30 p.m.
Fretz, Columbia, MD
Silent auction and sale of new, gently used, vintage and designer handbags.
Portion of proceeds benefit Claudia Mayer/Tina Broccolino Cancer Resource Center. 410-808-7041 or RGerber@CruiseOne.com

Answer the Call and Make a Difference
The 2014 Howard County Health Survey is a confidential phone survey that will ask questions regarding your health and lifestyle. Calls will be made to both land lines and cell phones, and the caller ID will read “HC Health Survey.” The survey, a project of HCGH, the Horizon Foundation, Howard County Health Department and the Columbia Association, will run May through August.

The results will help local health leaders, providers and funders better understand and respond to the current and emerging health needs of Howard County residents.

For more information and for the 2012 survey results, visit HowardCountyHealthSurvey.com.

View our online seminars and videos on a variety of health topics

Patient Seminars
hcgh.org/seminars

Health Videos
hcgh.org/videolibrary