Stories for Your Heart

An emergency worker has his own emergency

What to do if you suspect a heart attack
Dear Friends,

In this issue of *Wellness Matters*, you will read a story about a longtime partner of ours, Howard County Department of Fire and Rescue Services (HCFDRS). For more than 10 years, they have worked closely with the hospital and our cardiologists to develop cardiac protocols and programs that have been instrumental in saving the lives of our patients. Ironically, HCFDRS Battalion Chief Jimmy Brothers, who has lead the efforts over the years to initiate these programs with us, found himself as the patient when he suffered a massive heart attack last year. I invite you to read Chief Brothers’ story on page 3, which can teach you what to do when you think you are having a cardiac event and how you can recognize the symptoms.

HCGH is fortunate to enjoy partnerships with many community organizations, such as HCFDRS, that work to keep our community healthy. As health care continues to evolve, these partnerships will be even more vital in educating and maintaining our community’s health. I ask you, as a member of our community, to be our partner too and commit to doing all you can to be healthy.

Sincerely,

Steve 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
In this issue of Wellness Matters, we focus on the heart and what you need to know to stay healthy. According to the Centers for Disease Control and Prevention, heart disease is the leading cause of death in the U.S. Unfortunately, you may not realize that you are at risk of having a heart attack until it is too late.

**The Big Three**
According to David Jackson, M.D., a cardiologist on staff at HCGH, one of the critical steps to keeping your heart healthy is seeing your physician for a routine physical exam. Your physician will check your blood pressure, cholesterol and blood sugar. “These are the big three indicators for heart attack and stroke,” says Dr. Jackson. “If your numbers start to become abnormal, you may not feel differently or have any symptoms, so it is important to have them checked periodically and more frequently as you age. Having a primary care physician monitoring your care to see trends in your numbers is important. It is vital that you follow up with your physician when your numbers become borderline so that they do not become critically elevated.”

**Exercise Helps But Does Not Make You Immune**
You exercise several times a week. Your heart is healthy…right? Not necessarily. “Exercise is good for the heart but it does not fix everything and make you immune to heart disease,” warns Dr. Jackson. “You still need to think about other factors, such as diet, weight and cholesterol levels. Living a healthy lifestyle in some people cannot always prevent heart disease—genetics has a role, too.”

**Options to Diagnose Heart Disease**
A physical exam and bloodwork can only show some of the picture. Traditionally, if heart disease is suspected, you will be given a stress test. According to Dr. Jackson, to fail a stress test, you would need at least an 80 percent blockage in an artery. The stress test wouldn’t rule out heart disease, it would just indicate if you have high-level blockages.

Technology today can offer alternative screenings that can identify even a mild buildup of plaque in the arteries. “A carotid artery ultrasound screening can evaluate the arteries in your neck by measuring their thickness which can indicate whether you are at risk of developing atherosclerosis (hardening of the arteries),” notes Dr. Jackson.

“The second tool, a coronary artery calcium scoring test, is a CT scan (X-ray) of the heart. This test identifies the abnormal presence of calcium—a marker of hardening of the arteries from plaque buildup—that has calcified. This test is best if you are of middle age and have risk factors for heart disease. If these screenings show the presence of plaque, you are at a higher risk, and your doctor will provide a strategy for treatment.”

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David Jackson, M.D., is a cardiologist with Maryland Primary Care Physicians in Columbia. 
**Appointments:** 410-740-0789
THE WIDOW MAKER THAT WASN’T

Jimmy Brothers didn’t smoke.

He wasn’t overweight.

He exercised and watched what he ate.

*He was fit, healthy and only 46 years old when his heart stopped.*
On April 26, 2015, Jimmy felt like he was getting a cold. He just didn’t feel well but had his daughter’s lacrosse game to coach that day. He took some cold medicine and the family headed out. On the way home from the game, Jimmy found himself feeling nauseated. As they approached Elkridge, Jimmy realized he was in trouble and needed help. In his role as the Battalion Chief in EMS Operations for Howard County Department of Fire and Rescue Services (HCDFRS), Jimmy knew the symptoms. He was having a heart attack.

“The elephant had arrived and was sitting on my chest. The pain was crushing and shooting down my arm. I was sweating and nauseated. My wife was driving, and I realized we were so close to the Elkridge Fire Station. I told her to call to see if the ambulance was there.”

- Jimmy Brothers

“I called the station and told them I was bringing in Chief Brothers who was nauseated and, as I was talking, Jimmy added, ‘and having chest pain—tell them we are coming in hot,’” says Becky, Jimmy’s wife.

The ambulance crew was waiting outside when they pulled up to the station. Jimmy took two steps out of the car and collapsed onto the gurney as they attached a 12-lead EKG to get a reading of his heart. As they hit ‘send’ on the unit to transmit his EKG to Howard County General Hospital, his heart stopped.

Becky remembers, “Everything happened so quickly. As they put Jimmy into the ambulance, I saw the ambulance start to go up and down. I was in disbelief—it looked like they were doing CPR.”

When Becky arrived at the HCGH Emergency Department, Jimmy was already headed to the cardiac catheterization lab where they were waiting for him. The doctor pulled her aside and explained that Jimmy had suffered a massive heart attack and that the paramedics had performed CPR and shocked Jimmy’s heart back into rhythm during the ride to the hospital.

The cardiac catheterization showed a 100 percent blockage in the left anterior descending (LAD) artery—a condition sometimes referred to as ‘the widow maker.’ Jimmy was given a clot-dissolving medication and a stent was inserted to hold the artery open.

The doctor shared the images of Jimmy’s blocked artery as it was opened with Becky. “I knew when I saw the blood flow return on the film that he was going to be ok,” says Becky.

The irony of Jimmy’s story is that, in his role with HCDFRS, Jimmy had been instrumental in working with HCGH to bring much of the cardiac technology and protocols to the county—a system that nearly 10 years later would save his life. He even trained the paramedic who performed the high performance CPR on him.

According to Matthew J. Levy, D.O., medical director, HCDFRS; senior medical officer, Johns Hopkins Emergency Medicine Special Operations; and associate medical director, Johns Hopkins Lifeline, “our system in Howard County worked as we designed it to—that didn’t happen by accident—it wasn’t by chance; it was because of the ongoing training and long-term partnership HCDFRS has with the hospital.”

Continued on next page >>>
The System That Saves Time and Muscle

As a part of this unique partnership, paramedics are provided with advanced cardiac training at the HCDFRS Education & Training Section by HCGH cardiologists. In addition, HCDFRS ambulances are equipped with technology that can wirelessly transmit EKG data to HCGH cardiologists and emergency physicians in real time. In the event of a diagnosed heart attack, the hospital can assemble the cardiac catheterization team before the patient arrives—saving valuable time and, in turn, heart muscle. The gold standard of time to open an artery (often referred to as door-to-balloon time) is no more than 90 minutes from the time the patient enters the hospital’s door. Jimmy’s time was only 38 minutes because he knew to get help quickly.

“The earlier that lifesaving measures can be initiated, the less time the heart muscle is deprived of blood and oxygen which causes the heart to work harder possibly leading to dangerous cardiac rhythms as was the case with Jimmy. This is often followed by cardiac arrest,” notes Dr. Levy. “Jimmy’s heart attack involved the LAD/widow-maker artery which supplies blood to a large section of the heart muscle. It is the Interstate 95 of the heart—if you shut it down, the consequences are dire. Once the heart stops beating, we only have minutes to get it started again.”

Fortunately, Jimmy’s heart attack didn’t leave Becky a widow, but he does have some damage to his heart. He attended HCGH cardiac rehabilitation for several months and is feeling good. “Every day I wake up and feel it is good to be alive,” says Jimmy. “I encourage everyone to learn CPR so that, if a loved one has a heart attack, you know what to do. If you know CPR, download the free app at bit.ly/hccprapp and follow HCDFRS, so that you can be notified if someone near your location in Howard County is having a cardiac emergency. The app also will alert you of AEDs close by. And, most important, don’t wait, call 911 if you think you or a loved one is having a heart attack.”

“It’s never easy responding to an incident involving one of your own but it’s because of our collaboration with the team at Howard County General Hospital that Jimmy survived. Thanks to the cutting-edge initiatives we have with HCGH, we’ve been able to make great strides to create one of the best EMS systems in the region,” says Chief John S. Butler, HCDFRS.

To watch a video of Jimmy’s story, visit hcgh.org/minutesmatter.
“When the heart is deprived of oxygen, and cardiac tissue dies, heart muscle is permanently damaged. There is no way to reverse the damage.

This is why it is so important that you call 911 if you are experiencing chest pain so we can begin the process of emergency cardiac care quickly.

The 911 operator will ask questions that will help guide the right resources to you. Take an aspirin if you can. Waiting or driving yourself to the hospital could be the worst decision of your life, literally and figuratively.”

- Matthew J. Levy, D.O.

**KNOW THE SIGNS & CALL 911**

According to the American Heart Association, signs of a heart attack can include:

- chest discomfort
- discomfort in other areas of the upper body (one or both arms; back; neck; jaw or stomach)
- shortness of breath
- cold sweat; nausea; lightheadedness
- feeling of elephant on chest

Feeling like:

- breathing through a straw
- knife on back of skull
- looking through rainbow-like kaleidoscope
- mammogram of the chest
- lights went off in eyes
- head exploded
- grinding gears in the chest
- the flu
- heartburn
- arms are bowling balls

Dr. Levy warns, “For women the normal is abnormal. Although women can experience the traditional chest pain and pressure, they may not. Instead, they often have abdominal pain or pressure.”
Maintaining Heart Health: Avoid Sitting Disease

Sitting for many hours a day is a common practice. Without realizing it, many people are falling victim to sitting disease. The American College of Cardiology defines sitting disease as being sedentary for many hours with little movement and calls it a lifestyle risk factor for cardiovascular disease, blood clots, heart attack, stroke, diabetes and a variety of other conditions.

Even those who incorporate exercise into their routine can have sitting disease. “Going to the gym three days a week to get your heart rate up is not sufficient. You actually need to incorporate movement throughout your daily routine as well,” says Kabir Yousuf, M.D., a cardiologist on staff at HCGH. “Often people try to plan out their physical activity too much and get wrapped up with a trainer or a gym class exercise regimen instead of getting out and just moving. My philosophy is to just get up and move—the more the better. This is especially important if you have a sedentary job. Moving doesn’t have to be scheduled—every step and minute you spend doing physical activity counts and can reduce your risk of cardiovascular disease.”

Take Simple Steps

Dr. Yousuf suggests:

- Take the stairs
- For every hour you sit, move for five minutes. If you can’t do this every hour, do it every two hours and increase your movement to 10 minutes.
- Instead of sitting while on a phone call, stand
- Park further away in the parking lot to take advantage of walking
- Have walking meetings instead of sitting in a meeting throughout the day.
  If you even take a quarter of your meetings outside of the conference room and walk somewhere, it is beneficial.
- When you are at a store—instead of shopping right away—take a lap or two around the store before buying anything.
- Get a partner or a friend to motivate you—you will be more apt to be active when you have a partner.
- Incorporate technology—using activity trackers, websites and apps, you can track your activity and be reminded to move throughout the day.

Kabir Yousuf, M.D., is a cardiologist with Maryland Cardiovascular Specialists.
Appointments: 410-740-0549
Managing Congestive Heart Failure

Congestive heart failure (CHF) is a condition indicating that too much fluid has accumulated in the body. According to George Groman, M.D., a cardiologist on staff at HCGH, common causes of CHF can include a weak heart muscle damaged by a heart attack; leaking or narrowed valves; untreated high blood pressure; some cardiac arrhythmias; and, less often, diseases of the sac around the heart. These conditions can make the heart too weak to pump blood adequately. Another cause of CHF is diastolic dysfunction—when the heart is stiff and can’t sufficiently relax to fill with blood. This dysfunction becomes increasingly common with age and uncontrolled blood pressure as well as other causes.

Preventing Fluid Complications
If you have CHF, Dr. Groman recommends that, to reduce fluid buildup, you should:
- Limit salt intake. Use pepper or herbs and spices instead. Check with your doctor before using a salt substitute, which could cause a dangerous elevation of potassium.
- Be evaluated for sleep apnea if you snore.
- Use alcohol prudently—it can weaken the heart in some cases.
- Not use illicit drugs.
- Not smoke.
- Eat heart healthy—minimize saturated fat, trans fat and sugar.
- Maintain a healthy weight, and monitor your weight daily. If you see a progressive increase of three or more pounds in a week, call your cardiologist, who may adjust your diuretic dose.
- Exercise.
- Take medications prescribed by your cardiologist.

Treating Fluid Buildup: New Hospital Service
“There can come a time when your small intestine becomes so waterlogged that your medications cannot be adequately absorbed,” says Dr. Groman. “This can result in further fluid buildup and may put you at risk for needing hospitalization and other types of intensive care.”

To help patients avoid having to stay in the hospital, HCGH has begun an outpatient IV diuresis service to which your cardiologist can refer you. Appointments are offered weekdays in the hospital’s Infusion Center and last several hours to allow your nurse to record urinary output in response to the diuretic. During treatment, nurses will speak with you about your diet and medications. All patients will receive a referral for a home care evaluation and remote, nursing-based patient monitoring. Lab work will be done (primarily to evaluate kidney function) and reviewed prior to you returning home.

“This collaborative effort between the patient’s physician, clinic nurses and home health has the potential to keep patients out of the hospital—and that is a very good thing,” notes Dr. Groman.

Effectively Managing Congestive Heart Failure-Free Seminar
Learn about prevention, risk factors, diagnosis and healthy options.
For those with CHF, caregivers and those at risk. Presented by George Groman, M.D., March 3, 7-8:30 p.m.
HCGH Wellness Center. Register at hcg.org/events.
Silver Man or Iron Man?

Whether silver or iron, Michael Silverman, M.D., certainly has tested his mettle. In September 2014, he started a year of intense training in preparation for the IRONMAN World Championship. The training included biking 3,915 miles, swimming 414,240 yards, running 898 miles and completing 98 hours of strength training.

A cardiologist on staff at HCGH, Dr. Silverman could be seen on the roads of Howard County starting his day running or biking at 5:30 a.m. How does he have time to train, and how did he become an IRONMAN triathlete? This is his story…

I was an overweight and inactive kid, and never was an athlete during my school years. About 15 years ago, my weight was increasing and my cholesterol was high, so I began going to the gym. I found I liked spin classes, but I wanted to get out of the hot spin studio. My cardiology practice partner at the time, Dr. Jack McWatters, was an avid cyclist and lent me a bike so I could try cycling outdoors. That was the start of my addiction to cycling, which eventually led me to participate in many long-distance bike rides both locally and in such far-flung destinations as California and the French Alps.

Around the same time, a neighbor of mine, who was a ‘couch potato’ and a cigar smoker, announced that he was going to do a triathlon and I thought, “Why can’t I do that?”

So, in 2005, I found a triathlon training group and learned how to swim and run. I started competing in local events, like the Columbia Triathlon that is held in Howard County every May. Triathletes are so exuberant, excited and inclusive—they suck you into their world and you want to be part of the next challenge.

In 2011, a cycling buddy encouraged me to compete in my first IRONMAN in Florida, and it went exceptionally well. In 2014, I completed IRONMAN Lake Placid, which was scenic and beautiful. Afterward, my coach encouraged me to race in another IRONMAN in Lake Tahoe to keep up momentum and training. As it happened, an arsonist set a forest fire in the area around Lake Tahoe that week and, just as we were warming up for the swim, the organizers cancelled the event. In every IRONMAN competition, there are spots given to winners for the world championship. Because no

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Michael Silverman, M.D., is a cardiologist with Cardiovascular Specialists of Central Maryland in Columbia.

Appointments: 443-276-6050
winners came from the Lake Tahoe event, those spots were chosen from a lottery, and I was selected for one of those coveted spots at the IRONMAN World Championship.

An international race, the IRONMAN World Championship in Kona, Hawaii, features the best professional triathletes and best athletes from every age group. For this event, 2,300 athletes started the race and 2,144 finished on a 97-degree day with 100 percent humidity and 20 mph headwinds during much of the bicycle portion. During the race, I burned 10,500 calories!

I train between eight and 17 hours a week, depending on the season. I swim, bike and run, but adding strength training has kept me injury-free for the past three years. I limit processed carbohydrates. I don’t eat out of a box, I eat foods in their least processed form. I eat a variety of fruits and vegetables, lean protein, many grains, nuts, dark chocolate, and I drink almond milk.

Why do I do this? I like a challenge, I like how it feels and I want to set an example for my patients. I know the profound effect that exercise and diet have on your heart. My lipids were terrible before I started exercising regularly, and now they are off the charts good! My HDL/good cholesterol was under 30, now it’s 86; my LDL/bad cholesterol was 150-160, now it’s 79; my triglycerides were 250, now they are 38.

Cycling is my legal addiction. High, intense and regular levels of exercise cause a release of endorphins—it is truly addictive. If I can’t exercise because it’s snowing or I am too busy, you can tell by my lousy mood.

I tell my patients who don’t exercise that anything is possible—if I can do this, you can do this. You’ve got to start somewhere and build exercise into your routine. You don’t have to be like me, because I’m nuts! But you must build muscle mass and participate in aerobic exercise.

After running, biking and swimming the IRONMAN, I feel an overwhelming elation that I can’t even describe. Coming across the finish line makes me feel like there’s nothing I can’t do.

### Healthy Heart Advice from Dr. Silverman

You don’t have to be like me and do extreme exercise, but you should exercise regularly. The American Heart Association recommends at least 150 minutes of moderate exercise (or 75 minutes of vigorous exercise) every week for adults. This translates into 30 minutes a day, five times a week—but ANY amount of exercise is better than none!

Other important factors for heart health include:

- **Eat a balanced, healthy diet.** Lean meat and fish, a variety of vegetables and fruits, low-fat dairy, whole grain and low in sugar is recommended. Think about portion sizes and overall nutrition; limit processed foods.
- **Get sufficient sleep.** Between 7-8 hours a night is recommended for most people, establish a regular pattern of sleep versus trying to play “catch up” for missed sleep.
- **Don’t smoke.** If you smoke, quit. Smoking can raise your odds of getting cancer, as well as heart and vascular disease.
- **If you drink, do so in moderation and limit sugary beverages.** Sugary beverages—including alcohol—are empty calories. Too much alcohol can be unhealthy for your heart, your liver and contribute to your overall cancer risk.
- **Manage your stress.** Some recent studies suggest that yoga and meditation may be beneficial in reducing stress. Whatever technique you use, try to reduce stress, as it can impact your health, sleep, weight and blood pressure.

You don’t have to run a marathon, but do something. It’s never too late and you never know where it may lead you!
Many people suffer from anemia, but many do not realize how it can affect your heart’s function. Anemia can cause your heart to work harder to pump blood and result in a rapid or irregular heartbeat.

**What is Anemia?**

Anemia is a common blood disorder that occurs when there are fewer red blood cells than normal, or there is a low concentration of hemoglobin in the blood. “Anemia stems from a variety of conditions,” says Karl Kasamon, M.D., a hematologist on staff at HCGH, “but the most common cause is iron deficiency.” Common symptoms include lack of color in the skin, eyes and lips, increased heart rate, fatigue, breathlessness, irritability, headaches, irregular or delayed menstruation and jaundice.

“Those at the highest risk for anemia are menstruating females and generally elderly patients who have gastrointestinal-related blood loss or bleeding,” says Dr. Kasamon. When anemia is left untreated or is severe, it can affect your whole body —especially your heart.

“The connection between anemia and heart complications is clear,” says Dr. Kasamon. “Red blood cells carry oxygen from lungs to tissues. When your red blood cells are low (you are anemic), your heart has to pump and carry blood cells much faster to deliver the same amount of oxygen. This strains the heart to contract faster and more intensely than normal.” If you already have a heart condition, the condition can worsen if you develop anemia. Other factors, such as demographics, can determine the risk of anemia linking to heart conditions. “For example, 20 year olds with severe anemia rarely have dangerous complications, whereas older adults are at a much higher risk even if they are just mildly anemic,” says Dr. Kasamon.

**Getting Treatment**

Anemia is a reversible disorder. To optimize heart health, seek treatment for anemia to correct the red-blood-cell level back to normal, which will take strain off and positively affect your heart. Treatment varies depending on the cause of anemia and can include iron supplements, changes in diet, vitamins, prescription medication, blood transfusions or bone marrow transplant.

Dr. Kasamon also encourages those with anemia symptoms to be screened by a physician. “Patients often assume their anemia is caused by iron deficiency and self-medicate with iron. In some cases, this can cause iron overload and ironically lead to a variety of complications, including heart failure.”

**Karl Kasamon, M.D., is a hematologist with Chesapeake Oncology-Hematology Associates in Columbia.**

**Appointments:**
410-740-1744
HCGH Recognized as Top Performer

HCGH is proud to announce that the hospital has been recognized as a 2014 Top Performer on Key Quality Measures by The Joint Commission, which accredits health care organizations in the United States. The Top Performer program identifies accredited hospitals that attain excellence in measurable performance based on data reported about evidence-based care processes. The program acknowledged HCGH’s performance in multiple areas, including heart attack, heart failure, pneumonia, surgical care, children’s asthma and perinatal care.

“Delivering the right treatment in the right way at the right time is a cornerstone of high-quality health care. I commend the efforts of Howard County General Hospital for their excellent performance on the use of evidence-based interventions,” says Mark R. Chassin, president and CEO of The Joint Commission.

HCGH is one of 1,043 hospitals out of more than 3,300 eligible hospitals in the United States to achieve the 2014 Top Performer distinction and will be identified in The Joint Commission’s 2015 annual report, “America’s Hospitals: Improving Quality and Safety.”
HCGH Celebrates Heroes in Health Care

M&T Bank presents Heroes in Health Care, an evening celebrating HCGH’s lifesaving staff and partners. The event will be held on Friday, May 13, 2016, from 5:30 – 9:30 p.m. at the Homewood Suites by Hilton in Fulton, Md. Honorary co-chairs are Paul and Cindy Skalny. Music by Misspent Youth. Tickets and sponsorships are available. For more information, call 410-720-8706 or visit hcgh.org/heroesinhealthcare.

Thanks for Making Symphony of Lights Better and Brighter!

Symphony of Lights festivities will return to Symphony Woods in fall 2016. The iconic Symphony of Lights displays will be refurbished and new displays, featuring the latest technology, will transform this treasured holiday tradition into a magical experience! For updates, including the announcement of new elements to the Symphony of Lights festivities, 2016 dates and more, visit Facebook.com/symphonyoflightsfestivities.

If you are interested in supporting the refurbishment of the Symphony of Lights displays and the hospital, you can still sponsor a new LED light bulb for a donation of $10 at hcgh.org/brightenthelights. Donations can be made in honor or in memory of loved ones. Those supporting this campaign at a level of $100 or more will be recognized on the hospital’s website.

HCGH and HHF thank all of you who have volunteered and participated in Symphony of Lights over the past 21 years. A special thank you to our sponsors listed below. We look forward to seeing you at the 2016 Symphony of Lights festivities better and brighter than ever before!
Championing a Cause: Cancer Support for Families

Following the death of their friend, John Champion, after a battle with cancer, Howard County residents Doug Silverstein and Tim Finkelston found themselves inspired. “We had many mutual friends fighting cancer and wanted to do something,” says Doug. “We asked ourselves ‘who gets affected by cancer?’ That started us thinking about the children of the parent with cancer. Several of us met over a few months in 2015 and developed a nonprofit foundation that would be everlasting, Champions Against Cancer, aptly named after our friend John Champion.”

The principle mission of the foundation is to provide financial and other support to children whose parent has or has had cancer with the hope that the children can have a sense of normalcy restored in their lives. For example, funds can be used for continuing to take music lessons, playing on their sports team and participating in their community. The first year, the foundation held numerous fundraisers to do just that and received nearly $95,000 in support.

When looking for a way to donate some of the funds raised to provide support services to families of cancer patients in Howard County, the foundation discovered the Claudia Mayer/Tina Broccolino Cancer Resource Center. “The more I learned about the center, the more I realized how consistent it is with our mission,” notes Doug. “We were thrilled to provide a donation to support the center and the services it provides. We want to touch as many people as possible in Howard County and look forward to continuing to expand our reach and support the work of the center in the future.”

Volunteer Auxiliary Funds

Baby Grand Piano for Hospital Lobby

The lobby of HCGH was recently enhanced with the soothing sounds of a baby grand piano that was donated by the HCGH Volunteer Auxiliary. The piano can auto play or be played by a pianist.

“We are thrilled to have been able to provide this gift to the hospital,” says Kathy Lewis, president of the HCGH Volunteer Auxiliary. “So much can be said about the value of music—it brings normalcy and comfort to patients and visitors and can relieve stress.” The piano is the most recent donation from the Volunteer Auxiliary, following their $10,000 pledge to renovate the pediatric playroom from the cookbook sale funds raised.

The HCGH Volunteer Auxiliary is a membership organization whose primary function is to provide support for the hospital through fundraising activities. This dedicated group of men and women volunteer their time and talent in support of HCGH and its mission. The auxiliary is open to anyone who likes to organize, create, network, write, edit, speak in public or just contribute to the community. There is no required time commitment to be a member and you do not need to be a hospital volunteer.

Dues are $35 per year, which entitles each member to receive invitations to auxiliary meetings, special events and fundraisers, and receive the auxiliary newsletter and a directory of members. For a membership application or for more information, call the Howard Hospital Foundation at 410-740-7840.

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Two Smart Ways to Use Your Retirement Plan Assets

While a retirement plan is an excellent vehicle for accumulating assets for your use during retirement, much to many people’s surprise, it is a far less attractive way to pass an inheritance to loved ones.

When you leave your retirement plan assets to loved ones, distributions will be subject to income taxes. That percentage can be even higher if your estate is subject to estate taxes.

For example, if a person with a relatively small estate dies and leaves his or her daughter $100,000 in a retirement account, any distributions the daughter receives will be taxed at her ordinary income tax rate.

A better alternative for family members is to pass on income-tax-free inheritances, such as real estate, cash and life insurance. Using this alternative will allow you to use retirement plan assets to help your favorite charitable causes, which receive these assets free of taxes. Here are two ways you can use your retirement plan assets to their fullest potential and benefit the Howard Hospital Foundation (HHF):

1. **If you would like extra income:**
   By funding a charitable remainder trust with retirement plan assets, the trust makes payments to one or more loved ones for life or a term of years. Then, upon the trust’s termination, the balance supports HHF. The portion projected to go toward HHF passes free of federal estate taxes.

2. **If extra income isn’t necessary:**
   You can designate HHF as the beneficiary of all or a portion of your retirement plan assets. We will pay no income tax, and the assets will pass to the foundation estate tax-free, giving HHF 100 cents on the dollar. To complete your gift, simply ask your plan administrator for a change-of-beneficiary form.

For more information, contact the Howard Hospital Foundation at 410-740-7840 or visit hcgh.org/hhfplannedgiving.

57%

The number of Americans aged 30 and older who don’t know the tax effects on their retirement accounts when they name a loved one as beneficiary.

Source: “2009 Stelter Donor Insight Report”
John Lampe lost his wife, Anita B. Baker-Lampe, on May 7, 2015. She had suffered numerous heart problems that had her in and out of HCGH earlier that year. The interactions and caring experiences that she had with the staff spurred John to make a donation to the hospital’s Honor a Caregiver program from her estate.

“It was New Year’s 2015 when my wife had heart arrhythmia and was treated in the hospital’s Emergency Department,” recalls John. “We had a couple of procedures later that month and two more trips to the ER for cardiac events before her last day, May 7, when she suffered a cardiac arrest at home. Struggling with lung cancer, her heart just couldn’t manage anymore. I called 911, and she had another cardiac arrest in the ambulance; and then again in the ER. During that time, while they were trying to stabilize her, the hospital chaplain came and talked to me—not necessarily about religion—but about her background, and I very much appreciated that conversation. A staff doctor told me that her chances of being stabilized were extremely remote. It wasn’t too long, and we were in the ICU, where I was so very well consulted and informed. Anita had never wanted to be artificially supported. They told me she wouldn’t be able to respond to me but to sit next to her and talk to her and she would feel and hear me—those were the last senses to go. I appreciated being told that and the advice that the chaplain gave me.

“I donated to the Honor a Caregiver Program because every time we came home from her heart treatments there, and as she was feeling better, she would say how she so appreciated how well she was treated. The ER staff never missed a step during her visits—it wasn’t just the physical care but the emotional care, too. Those experiences, combined with the professional and emotional treatment on her last day, including the chaplain—who was there for me—needed to be recognized.”

- John Lampe

If you would like to make a donation to honor an HCGH caregiver, call 410-740-7840 or visit hcgh.org/honoracaregiver.
**Common GI Procedures: What You Should Know**
Your physician may order GI tests if you have experienced ongoing indigestion, acid reflux or blood in your stools. Learn about these procedures and understand the important information they provide in treatment. Presented by Rudy Rai, M.D. 3/23, 7-8:30 p.m. Free.

**Effectively Managing Congestive Heart Failure (CHF)**
Learn about prevention, risk factors, diagnosis and healthy ways to manage CHF. For those with CHF, their caregivers and those who are at risk. Presented by George Groman, M.D. 3/3, 7-8:30 p.m. Free.

**CPR Across Howard County**
American Heart Association Family & Friends CPR for the adult and child victim. For the community. Not a certification course. 4/30, 9 a.m.–12 p.m. Free.

**Eating Well: Prescription for Better Health**
A certified nutritionist/registered dietitian will discuss the relationship of food and nutrients to immunity, chronic disease management, healing and more. 4/12, 7-8:30 p.m. Free.

**New Prostate Cancer Screening Guidelines: A Patient and Physician Perspective**
Prostate cancer screening recommendations have recently changed. Join H. Ballantine Carter, M.D., professor of urology and oncology at the Johns Hopkins School of Medicine for an explanation of the new guidelines. Dr. Carter, an internationally recognized specialist in the diagnosis and treatment of prostate disease who served on the panel that developed the new screening guidelines, has studied thousands of patients with prostate cancer using a treatment approach called “active surveillance,” where men undergo regular evaluations in order to determine whether treatment is necessary. Cancer survivor Guido Adelfio will share his personal story. A reception with refreshments will follow the presentation, where Dr. Carter and urologists from Central Maryland Urology Associates (including Drs. Applestein, Bepple, Blumenthal, Kishel, Nezu, Rodriguez and Tully) will answer questions from attendees. 4/20, 6-8 p.m. Free.

**HEALTHY HEART & LUNGS**

**Adult, Child and Infant CPR/AED**
Learn skills to clear an airway obstruction, perform CPR and how to use an automated external defibrillator (AED). Earn two-year American Heart Association completion card (not a health care provider course). 3/9, 3/29, 4/11, 4/26, or 5/11, 5:30–9 p.m. $55.

**Smoke-Free Lungs**
Education and support for those wanting to quit or who have quit. 3/3, 7–9 p.m. Free.

**Cardiac Rehabilitation Program†**
Assistance for cardiac patients in the recovery phase following a heart attack, angioplasty or cardiac surgery.

**Cardiac Rehabilitation Maintenance†**
Exercise for cardiac rehab program graduates. Tuesdays and Fridays, 8 a.m. or 9:30 a.m. $60/mo.

**Pulmonary Rehabilitation†**
Exercise and education to assist patients with lung disease.

**Pulmonary Rehabilitation Maintenance†**
Exercise maintenance for pulmonary rehab program graduates. Tuesday and Friday afternoons. $60/mo.

**CHILDREN & TEENS**

**Essentials in Babysitting**
Learn to manage children, create a safe environment and apply basic emergency techniques. 3/12, 4/2, or 5/14, 9 a.m.–1 p.m. $55.

**Home Sweet Home**
Children (8-12) and their parents learn ways for children to stay at home alone. 3/12, 9-11 a.m. Free.

**Kids Self-Defense**
Children (8-12) learn basic safety awareness and age-appropriate self-defense techniques. 4/9, 9-11 a.m. $27.

**Self-Defense for Young Women**
Teens (12–15) learn physical and psychological strategies of self-defense. 6/11, 9-11 a.m. $35.

**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 Dr., Ste 100 Columbia, MD 21044

**Ongoing Support Groups:** Contact hcgh.org or call 410-740-7601.

**Cancer Support Groups:** Call 410-740-5858.
**IMPROVING WITH AGE**

**AARP Driver Safety**
Classroom refresher for ages 50+. 3/14, 4/11, or 5/6, 10 a.m.–2:30 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. 3/15, 7–8:30 p.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. 3/22, 7–8:30 p.m. Free.

**Using Medicare’s Plan Finder**
Learn how to use the ‘Plan Finder’ tool on medicare.gov to compare and review the Medicare Prescription Drug Plans available to you. Presented by the State Health Insurance Assistance Program, Howard County Office on Aging. 3/29, 7–8:30 p.m. Free.

**HEALTHY FAMILIES**

**Maybe Baby: Financial Issues for Prospective, Expectant, and New Parents**
A Certified Financial Planner™ will discuss financial issues involved in starting a family. Leave with a plan to help you feel confident about your finances. 4/21, 7–9 p.m. Free.

**Choose Your Pediatrician and Promote Your Newborn’s Health**
Learn factors to consider and questions to ask when choosing your pediatrician and ways you can promote your newborn’s health. Presented by Claudia Beck, M.D. 5/10, 7–8:30 p.m. Free.

**Happiest Baby on the Block**
Parents and parents-to-be learn techniques to quickly soothe baby. 4/19, 7–9 p.m. $50 per couple (includes parent kits).

**Prenatal Class for Early Pregnancy**
Parents-to-be and those in the first trimester of pregnancy learn about pregnancy’s early stages. 5/3, 7–9 p.m. Free.

**Prenatal Yoga**
Prepare for baby’s birth with safe movements to stretch, strengthen and relax your body. No yoga experience needed. Physician permission required before first class. Wednesdays, 3/9–4/27, 6–7 p.m. $88/eight-week session.

**FREE SCREENINGS**

**Diabetes Screening & BMI with Stroke Assessment**
Meet with our registered nurses to receive a free diabetes/stroke screening which includes a blood glucose test, blood pressure screening, BMI (body mass index) measurement, stroke-risk assessment and weight management information. 5/18, 9–11 a.m.

**Skin Cancer**
Dermatologist will examine one or two areas of concern. 5/17 & 19, 5–7 p.m.

**GET HEALTHY WITH DIET & EXERCISE**

**Dietary Counseling**
Discuss dietary concerns/goals with a registered dietitian. $40/half-hour visit.

**The Mall Milers**
Walk-for-health program at The Mall in Columbia. Blood pressure screenings on the second Tuesday of the month. Free.

**Living Well**
Learn to manage your health, develop a diet and fitness plan, deal with pain and communicate with health professionals. 410-313-5980. Fridays, 4/1–5/6, 10 a.m.–12:30 p.m. $28.

**FOCUSBING ON BODY AND MIND**

**Prediabetes**
Our certified diabetes educator and registered dietitian will teach you how to make changes to prevent/delay actual diabetes. 5/5, 7–8:30 p.m. $15.

**Individualized Diabetes Management**
Learn from a certified diabetes dietitian and nurse how to manage diabetes. 443-718-3000.

*Most insurance plans cover all or part of this program.

**Women’s Self-Defense**
Women (16 and up) learn and practice highly effective, easy-to-learn techniques designed for adult situations. 6/25, 9 a.m.–12 p.m. $50.

**Advance Directives**
How do you want to be cared for at the end of your life? Who will make decisions about your health care? Do you know your loved ones’ wishes? Join us for a conversation about advance directives and receive an advance directives document to begin the process. 4/15, 6–7 p.m. Free.

**New Diabetes Education Programs**
While HCGH has offered comprehensive diabetes education programs, we will now be offering more frequent classes in a new location—HCGH Wellness Center. A range of classes will be provided for those who are newly diagnosed, taking insulin for the first time, diagnosed with gestational diabetes and those who have had diabetes for some time. Classes are offered in small groups to allow for a personalized program. Individual counseling is also available. Visit hcgh.org/diabetes for schedule.
calendar 2016 of Events:

**MARCH**

**Latino Health Fair**  
*Saturday, March 12/12 – 4 p.m. Free.*  
Wilde Lake Interfaith Center  
Cosponsored by HCGH, Priority Partners and St. John the Evangelist Catholic Church. Receive numerous health screenings.

**APRIL**

**WomenFest 2016**  
*Saturday, April 30/10 a.m. – 3 p.m. Free.*  
Gary J. Arthur Community Center at Glenwood, Cooksville, MD  
An inspirational health and wellness event featuring 90+ exhibitors, health screenings and seminars presented by the Howard County Department of Citizen Services’ Office on Aging. For more information, call 410-313-5440 or visit howardcountyaging.org/WomenFest. Pre-registration is not required.

**MAY**

**Heroes in Health Care Event**  
*Friday, May 13/5:30 – 9:30 p.m.*  
Homewood Suites by Hilton, Fulton, MD  
M&T Bank presents Heroes in Health Care, an evening celebrating HCGH’s lifesaving staff and partners. Honorary co-chairs: Paul and Cindy Skalny. Music by Misspent Youth. Tickets and sponsorships available. For more information, call 410-720-8706 or visit hcgh.org/heroesinhealthcare.

**JUNE**

**26th Annual Howard County General Hospital Benefit Golf Classic**  
*Monday, June 6/11 a.m.*  
Cattail Creek Country Club, Glenwood, MD  
Registration: 11 a.m. Shotgun start: 12:30 p.m.  
All proceeds benefit HCGH.  
Register now to secure your tee time by calling Howard Hospital Foundation at 410-720-8706 or visit hcgh.org/benefitgolfclassic.

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Umbilical and Inguinal Hernias  
Gallstones/Gallbladder Attack Symptoms & Treatment  
With Karen Natoli, M.D.  
bit.ly/karennatoli  
With Hadley Wesson, M.D.  
bit.ly/hernia_wesson

Common Causes of Back Pain  
Treating: Muscular Back Pain; Nerve Pain in the Back, Neck and Legs; Spine Arthritis and Back Injury  
Treating Pain from Cancer  
With Steven Levin, M.D.  
bit.ly/levin_pain

Planificando su Embarazo  
Dieta y Ejercicio Durante el Embarazo  
Como Tener un Embarazo Más Seguro  
Que Puede Esperar a Comienzos de su Embarazo  
With Francisco Rojas, M.D.  
bit.ly/embarazo_rojas

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**Online Seminars & Videos**

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