On the Road Again With a New Hip
Patient Returns to “Business as Usual” Thanks to Expert Surgical Team

The first time Manish Inala found himself on a volleyball court was in July 2006. It was also the last time. Inala, a married father of two who lives in Urbana, Maryland, was a 38-year-old computer software consultant working in Virginia when his colleagues talked him into participating in an inter-office volleyball game. During his very first practice one of his teammates collided with him, knocking him to the ground.

Inala remembers being hit hard on the side of his right thigh before briefly blacking out. In tremendous pain and unable to move his leg, he was rushed to the nearest hospital, where an X-ray revealed a fracture of the upper part of his femur, requiring immediate surgery. An orthopaedic surgeon inserted a dynamic hip screw to hold Inala's bones in place while they healed.

After a period of rehabilitation, Inala spent the next eight years leading a fairly normal life, although he experienced occasional discomfort in his leg due to a slightly protruding screw and he wore a shoe lift because his right leg was now shorter than his left. In March 2014, however, Inala's leg pain became more intense and was accompanied by sharp ankle pain. He returned to the surgeon who treated him after his injury.

The surgeon recommended the removal of the hardware in Inala's hip and scheduled the surgery for June 2014. Unfortunately, the hardware proved difficult to remove and the surgeon was forced to leave several broken screws in place. Inala was sent home the same day, but woke up the next morning in severe pain. The surgeon ordered him back to the hospital, where he learned he had a significant new fracture in the same femur, which likely occurred during the second surgery. Another emergency procedure left Inala with even more hardware than before. This time, his return to a “normal” routine would be very short lived.

In April 2015, Inala began to experience hip and groin pain. Believing the pain was tendonitis or muscle tightness, his surgeon referred him to physiotherapy. When the pain intensified, Inala decided it was time for a second opinion. “This ordeal had become a nightmare for my family,” he says. “My job requires extensive travel each week, sometimes to multiple cities. I didn't know what the future held for me.”

In early July 2015, Inala met with an orthopaedic surgeon in Montgomery County. The new surgeon diagnosed avascular necrosis of the right hip, a death of the bone tissue at the head of the femur. Because his case was so complicated, the surgeon referred Inala to Dr. Daniel Valaik of Johns Hopkins Orthopaedic & Spine Surgery in Bethesda.

“By the time Mr. Inala came to see me he was in tremendous pain, he was using two crutches and could barely walk, and one of his legs was significantly shorter than the other,” says Dr. Valaik. “He had broken screws in his femur and the femoral head had essentially died. His only option was a total hip replacement.”

Dr. Valaik braced Inala for the prospect of two surgeries. During the first, Dr. Valaik would remove all the hardware. After waiting for the bones to heal, he would then replace Inala's hip. Dr. Valaik also discussed the possibility that he would need to use a bone graft from a cadaver to fortify Inala's bone after the screws had been removed.

“This was a complicated case,” says Dr. Valaik. “It’s hard enough to take out hardware that’s intact; once hardware breaks, it’s very hard to locate it, take it out, and ultimately preserve the femur so that you can perform a successful hip replacement. There was a fair chance that after removing the hardware, the femur would have so many holes that it wouldn't support a new hip.”
The first surgery was scheduled for August 2015 at Suburban Hospital. “I was very nervous about the surgery,” remembers Inala, “especially given all the uncertainties and potential complications, as well as my previous experiences. But I learned that the doctors and staff at Suburban perform more joint procedures than any other hospital in the county, and they are well trained to handle these types of replacements.”

Dr. Valaik carefully planned the surgery, taking advantage of specialized instruments and technology, including intraoperative fluoroscopy, or real-time x-ray imaging of the hip. “Thankfully for Mr. Inala, I was able to remove all the previous hardware with minimal disruption of the bone. This allowed me to perform the hip replacement during the same operation. I also found areas of normal bone within the femoral head, which I removed, allowing me to use Mr. Inala’s own bone to provide the necessary bone graft. I then used a specialized hip replacement that is modular and can be custom fit to the patient in order to bypass the bone defects in the femur from the broken hardware.” Dr. Valaik also individualized Mr. Inala’s hip replacement to re-establish the proper length of his right leg.

“We are fortunate at Suburban Hospital to have a knowledgeable and skillful intraoperative team that can handle these types of complicated joint replacements that other surgeons might have to turn away,” says Dr. Valaik. “In Mr. Inala’s case, we had a great result and he has a new hip that should last him 20 years or more.”

Today, Inala is back to traveling for work several days each week and is looking forward to a promising future. “After limping for the past nine years, my two legs are finally the same length again!” he exclaims. “In addition, my pain is completely gone.”

“You come across someone like Dr. Valaik and you regain your trust in medicine,” he continues. “There isn’t a day that goes by when I don’t think about what he has done for me. Thanks to Dr. Valaik and his surgical team at Suburban Hospital, I’m literally back in business.”

“We are fortunate at Suburban Hospital to have a knowledgeable and skillful intraoperative team that can handle these types of complicated joint replacements that other surgeons might have to turn away.”

Daniel Valaik, MD

Operation Walk: Suburban Staff Help Patients Thousands of Miles Away

This past January, orthopaedic surgeon Dr. Daniel Valaik was one of three volunteers from Suburban Hospital who participated in a 10-day trip to India as part of Operation Walk Maryland. Joined by Suburban OR nurse Madeleine Felley and OR technician Katherine Pelton, Dr. Valaik was part of a group of approximately 50 medical and non-medical volunteers who provided free joint replacement surgeries for needy residents of Ludhiana, India.

Operation Walk, which was started approximately 20 years ago by an orthopaedic surgeon in California, is a private, not-for-profit, volunteer medical services organization that provides free surgical treatment for patients in underserved areas around the world who suffer from debilitating bone and joint conditions.

Operation Walk Maryland was established in 2007 and is headed by Johns Hopkins orthopaedic surgeon Dr. Harpal “Paul” Khanuja and his wife, Maria, a nurse practitioner.

Operation Walk provides all the staff and materials necessary to provide the same level of care that U.S. patients experience, including all healthcare personnel, implants, instruments and supplies. This year, the medical team screened 75 people before completing 59 joint replacement surgeries for 47 patients.

“I never thought that something as routine to us as a joint replacement could alter someone’s life so significantly,” says OR nurse Madeleine Felley. “We were not only helping each patient walk, but also helping the larger society by getting these individuals back to work.”

“The goal is to restore a quality of life that these patients haven’t had in years,” says Dr. Valaik. “This work brings out the best in the medical team. It’s medicine at its purest.”

TO LEARN MORE | For more information about Operation Walk Maryland, go to operationwalkmd.org.

From left, OR nurse Madeleine Felley, OR technician Katherine Pelton and Dr. Daniel Valaik with a patient they operated on in India during their recent Operation Walk experience.
A few months ago, I read an opinion article in the Washington Post entitled “The Art of Doctoring is Dying.” I feel compelled to respond and share my thoughts with our community.

At Suburban Hospital, we value and understand the critical importance of a sacred and healing relationship between the patients we serve and our caregiver team. That is why our physicians decided to be proactive in an effort to remind ourselves why we began practicing medicine in the first place — to help others. Thanks to our collaboration with The Institute of Healthcare Excellence and its executive director, William Maples, M.D., our journey has helped ensure we keep the humanity in medicine.

Too often I hear stories from patients who tell me that their physicians don’t have time to listen to them. These patients perceive that physicians prefer a cold and impersonal relationship with their patients, resorting to documenting on a computer rather than listening. This is not true. Physicians want to know their patients. We want to care for them and help them be well. Unfortunately, the regulatory and financial requirements physicians face sometimes impede our ability to care for patients in a way that gives us joy.

The physicians at Suburban Hospital have embarked upon an aggressive campaign to reconnect with our patients through an initiative that focuses on our communication skills. At the core of efficient, safe and human-centered patient care is strong communication. The Institute for Healthcare Excellence provided us with access to a collection of industry leaders focused on improving the design of patient, family and caregiver interactions.

Core principles of this communication training are:

1. That it be owned and delivered by physician and allied health leaders within a health care organization.
2. That it is relevant to the daily experience of physicians and caregivers.
3. That it is financially feasible and sustainable.

We are learning to involve our patients as partners in their care and improving our communications skills with patients and families. In particular, as our population ages, our responsibility is to continue to provide excellent and memorable clinical care that overcomes the challenges facing older adults. At Suburban Hospital, we are doing this by teaching one another the skills necessary to create a culture of excellence where the outcomes, safety and experiences of our patients and caregivers will be exceptional—a culture that embraces teamwork, compassion, respect and trust.

We know that good medicine requires an emotional bond between patients and physicians. We also know that the wellbeing of our patients depends on the wellbeing of physicians. Accordingly, we have also begun to focus on how to “heal the healer.” The physicians at Suburban Hospital are undertaking a program to treat physician burnout. Our team is coming together to help one another build resilience techniques into our daily lives. We understand that our colleagues need to take care of themselves before they can provide exceptional care to our patients, and we aim to support this.

We want our physician colleagues to know that the work that they do makes a difference in peoples’ lives. What motivates us as physicians is bringing an element of significance to other human beings—our patients, our colleagues and our families. Without that sense of significance and satisfaction, we cannot go home at night feeling good about our day nor can we wake up the next morning eager for the day ahead.

The art of doctoring is not dying, but rather the “art of medicine” is changing and the way that physicians approach patient care is morphing faster than we ever thought possible. Medicine will continue to evolve as we add new knowledge and technology at an unprecedented pace. But, how do we do that and not lose the close, personal touch with patients and their families? The challenge is to learn new methods of practicing medicine so that we are mindful that our personal connection with our patients is not lost.

Diane Colgan, M.D., is a privately practicing plastic surgeon. She also serves on Suburban’s Patient and Family Advisory Council, a group of staff leaders and volunteers dedicated to promoting a culture of patient- and family-centered care.

“We are learning to involve our patients as partners in their care and improving our communications skills with patients and families.”

Diane Colgan, MD
Neighborhood Villages Help Seniors Age in Place

The African proverb “it takes a village” is most often used when describing raising a child. But a fast-growing neighborhood village movement is helping older adults “age in place” at home. Villages are organizations that are formed to coordinate volunteer help for their members through a neighbor-helping-neighbor model.

Suburban Hospital wants community members who choose to age in place to also remain healthy as they do so. That is why the hospital has taken a growing interest in the village movement as a means to reduce emergency room visits and hospitalizations, as well as unnecessary readmissions to the hospital. These goals are more easily met when older adults have someone they can count on to pick up their medications, drive them to follow-up doctor’s appointments, stock their kitchen with nourishing food or just stop by for a friendly chat.

Suburban’s community health nurses have also begun to participate in village meetings by presenting topics such as diabetes, heart disease and fall prevention and to conduct blood pressure screenings. Suburban plans to incorporate the services of local villages into discharge plans for its patients.

Two volunteer members of Suburban Hospital’s Community Benefit Advisory Council, Betsy Carrier and Eva Cohen, both of Bethesda, have been instrumental in launching the Bradley Hills Village in a neighborhood close to the hospital. Cohen notes, “We’re all just a fracture or an illness away from being hospitalized and needing help upon returning home. It’s comforting to know that I have access to handyman work, prescription and grocery delivery, transportation to doctor’s appointments or just a friendly face to spend time with, should I become homebound.”

Carrier adds, “As people retire and age, they can become socially isolated. In response, we’ve created a calendar of neighborhood activities—so that our older neighbors don’t have to travel far to have interaction with others. Research has shown that social interaction has an important role in physical and emotional health.”

Montgomery County employs a full-time village coordinator, Pazit Aviv, whose job it is to help local villages get off the ground as well as provide resources to existing ones. “There’s so much power in villages,” says Aviv. “We have only begun to realize their full potential.”

TO LEARN MORE | To learn more about local villages, go to bit.ly/SHvillages.
Other call to action?

Transition guide nurse Margie Hackett meets with Bradley Hills Village members Betsy Carrier and Eva Cohen. Thanks to funding by the Wolpoff Family Foundation, Inc., Suburban Hospital is helping members of local villages age in place by encouraging seniors to participate in programs that target their health and wellness needs before a crisis occurs.
Noteworthy!

Suburban Welcomes New Pediatrician

Dr. Nuria Carrillo recently joined Suburban Hospital’s medical staff as a pediatrician in the Shaw Family Pediatric Emergency Center.

In addition to seeing patients at Suburban, Dr. Carrillo is a senior attending physician at the NIH Clinical Center, where she conducts clinical studies for rare diseases. She received her medical degree from the National Autonomous University of Mexico, completed her residency in pediatrics at Georgetown University Hospital and her fellowship in medical and biochemical genetics at Children’s National Medical Center and the NIH.

The Shaw Family Pediatric Emergency Center provides children of all ages with high-quality care in a kid-friendly, patient- and family-centered environment. From emergency treatment to inpatient admissions, the Pediatric Emergency Center recognizes the unique medical needs of young patients in an atmosphere specifically designed for children.

New Video Explains Role of the Hospitalist

Many patients admitted to Suburban Hospital are cared for by a hospitalist—a healthcare professional specially trained to provide care in the hospital setting. As experts in care coordination as well as clinical care, hospitalists might be referred to as the “quarterbacks” of patient care in the hospital. To meet some of our hospitalists and learn more about their role, please visit Vanity URL.

Radiation Oncology Team Expands Now Offering Subspecialized Approach for the Treatment of Brain Tumors and Head and Neck Cancers

Patients with very small tumors inside the brain, as well as the head and neck region, often require extremely precise, high-dose radiation therapy, known as stereotactic radiosurgery. This non-invasive treatment option is now available from the Johns Hopkins University Department of Radiation Oncology located at the Johns Hopkins Health Care and Surgery Center in Bethesda. Providing this treatment is new Johns Hopkins radiation oncologist, Brandi R. Page, M.D., whose areas of expertise include advanced radiotherapeutic management of head and neck cancer and intracranial tumors.

As part of a larger multi-disciplinary oncology team, Dr. Page works alongside neurosurgeons, neuro-oncologists, medical oncologists, otologists and head and neck surgeons who practice at Suburban Hospital to create individualized radiation therapy plans tailored to each patient’s specific needs. Each patient also has access to the most advanced therapies and clinical trials.

Dr. Page’s research interests include clinical trial design, studies of quality of life and survivorship after radiotherapy and techniques in stereotactic radiosurgery.

FOR MORE INFORMATION | For appointments, call 301-896-2012 or visit suburbanhospital.org/radonc.

Explore Hot Topics with OASIS

OASIS is hosting a Summer Speakers Series of hot topics including the presidential election, the Summer Olympics, “Spotlight” on Journalism and more. The distinguished list of presenters includes Eleanor Clift (political correspondent and best-selling author), Christine Brennan (sports columnist, USA Today) and Martin Baron (executive editor, The Washington Post).

OASIS is a national nonprofit that promotes healthy aging through lifelong learning, volunteer opportunities and health and wellness programs. Suburban Hospital, in partnership with the Macy’s Foundation, sponsors the Washington Metropolitan OASIS center.

The series will take place at the Johns Hopkins University Montgomery County Campus on Medical Center Drive in Rockville. To register, visit oasisnet.org/Washington (Class # 108, 109, 114, 115, 120, 123 and 124) or call 301-469-6800, press 1 then x211.

Hospital Practices for Mass Casualty Event

Suburban Hospital staff are shown working on a volunteer “patient” with simulated injuries during a recent mass casualty drill. As the state-designated regional trauma center for Montgomery County and the surrounding area, these drills help prepare Suburban Hospital for a surge in wounded patients.
News

Stroke Program Receives Award

Suburban Hospital has received the 2016 Get With The Guidelines®-Stroke Gold-Plus Achievement Award from the American Heart Association/American Stroke Association for applying the most up-to-date evidence-based treatment guidelines to improve patient care and outcomes.

Suburban’s Stroke Center earned the award by meeting specific quality-achievement measures for the rapid diagnosis and treatment of stroke patients. These measures include aggressive use of medications and risk-reduction therapies aimed at reducing death and disability and improving the lives of stroke patients. The Gold Plus award recognizes performance of 24 consecutive months that demonstrate at least 85 percent compliance in each of the seven Get With The Guidelines-Stroke Achievement Measures.

This is the second time Suburban was awarded a Gold Plus award from the American Heart Association/American Stroke Association.

Get With The Guidelines®-Stroke also helps Suburban’s staff implement prevention measures, which include educating stroke patients to manage their risk factors, understand the warning signs for stroke and ensure that they take their medications properly.

And the Winners Are…

2016 Suburban Hospital Nurses and Patient Techs of the Year

At Suburban Hospital, nurses and technicians treat every patient as unique and deserving of compassionate, individualized care. During Nurses Week 2016, the hospital recognized those who went above and beyond with a Lambert Award naming them nurse or technician of the year for their division. Congratulations!

Looking to Grow Your Nursing Career?

Join Our Team

Suburban Hospital provides great professional opportunities for nurses in all specialties.

- Competitive salaries
- Clinical ladder
- Nursing professional councils

To learn more, visit hopkinsmedicine.org/suburban_hospital/careers.
“Our new operating rooms, expected to open in 2019, will allow us to provide the best care for our surgical patients and enable us to perform the most complex procedures for orthopaedic, spine, brain, head and neck, trauma surgery, and more. The facilities will be high-tech with digital screens for real-time visualization and large enough to accommodate the latest innovation in surgery, like robotics, CT or MRI, and computer-assisted technologies.”

Tasha Blanks, RN | Surgical Nurse