

# Baylor Scott & White Health

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sw.org | College Station Region

May 2015



“They not only saved my life. They saved my quality of life.”

**Stefan LeRow**

received timely, effective care  
for his stroke PAGE 6



## FIND THE ONE!

Here's how to choose the best  
primary care physician for you  
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Scott & White Healthcare is now part of



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# You're Pregnant. Now What?

If you've recently found out you're pregnant, congratulations! As you begin your nine-month journey, you might find yourself wondering what to do next. Here, we share a few things to put on your to-do list.

▶ **Make your first prenatal appointment.** Most physicians like to see patients for their first prenatal visit between weeks eight and 10 of pregnancy.

▶ **Sign up for MyChart ([sw.org/mychart](http://sw.org/mychart)).** This online tool lets you access your medical records, schedule appointments, email your doctor, get lab results and more.

▶ **Register for breastfeeding, parenting and childbirth classes.** Scott & White offers these classes

in College Station and Brenham for free or for a minimal fee to help prepare you for childbirth and life after your baby comes home.

▶ **Take a hospital tour.** It will help you and your partner become familiar with the facility before you're in the throes of labor.

## BABY ON THE WAY?

Scott & White Hospital – College Station and Scott & White Hospital – Brenham offer childbirth education, infant CPR, baby care, daddy boot camp, breastfeeding classes and more. Visit [babyclasses.sw.org](http://babyclasses.sw.org) to view class schedules.

## EXPERT IMAGING

When it comes to detecting and diagnosing disease, few technologies are as valuable as imaging. To further ensure safety and quality for its patients, Scott & White Hospital – College Station recently underwent a rigorous process to become accredited by the American College of Radiology (ACR) in ultrasound, magnetic resonance imaging (MRI) computed tomography (CT), nuclear medicine and mammography. Scott & White Hospital – College Station is currently the only health care facility in the Brazos Valley to receive these accreditations.

To receive accreditation, a hospital must demonstrate that the facility and equipment meet or exceed quality assurance and safety guidelines, and that staff are qualified through education and certification to perform and evaluate diagnostic imaging tests.

“I'm very proud of the outstanding work of our team,” says David Daugherty, regional director of radiology at Scott & White Hospital – College Station. “This achievement demonstrates our continued emphasis on quality care throughout a patient's journey, and we hope to become ACR-accredited in breast MRI and stereotactic biopsy in the near future.”

**MORE**

## Get a Clearer Picture

Visit us at [radiology.sw.org](http://radiology.sw.org) to learn more about Scott & White's radiology services in the College Station area.

Scott & White Healthcare, 700 Scott & White Drive, College Station, TX 77845. President: Jason D. Jennings, FACHE; Chief Medical Officer: William L. Rayburn, MD, FACOG; Hospital Marketing Manager: Kathy Koza. Main Number: 979.207.0100 or visit [sw.org](http://sw.org) for information about services, providers, career opportunities and more. Find a physician at [doctors.sw.org](http://doctors.sw.org) or a location at [clinics.sw.org](http://clinics.sw.org).

Baylor Scott & White Health Mission: To serve all people by providing personalized health and wellness through exemplary care, education and research as a Christian ministry of healing.

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 HEALTH  
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# Protect the Skin You're In

Skin cancer strikes more Americans than all other cancers combined. Take these steps to prevent it or find it early.

**Cover up.** Put on a shirt, use broad-spectrum SPF 30 or higher sunscreen (experts recommend using an amount the size of a golf ball), and wear a hat and sunglasses when out in the sun.

**Avoid tanning beds.** These give off harmful UV rays. In fact, they increase the risk of melanoma, the deadliest form of skin cancer.

**Check your skin.** By examining your own skin and seeing your doctor regularly, most skin cancers can be found early.



Use SPF 30 or higher sunscreen

This is especially important for people with lower immunity, a previous skin cancer diagnosis or a strong family history. Look for new moles or changes in existing moles.

## MAKE AN APPOINTMENT

A doctor can help you identify skin cancer early, when it's most treatable. Find a dermatologist near you—visit [FindDrRight.com](http://FindDrRight.com) today.

## BE READY FOR YOUR CLOSE-UP

Are you scheduled for a diagnostic imaging test? Make sure you're set up for a successful screening by coming prepared. Here are some dos and don'ts for your upcoming X-ray, MRI, CT scan or ultrasound.

### DO

- ▶ Wear comfortable, loose-fitting clothes.
- ▶ Drink only clear liquids the day of the test, unless your doctor has instructed otherwise.
- ▶ Notify your doctor before your test of any health conditions, medications or possible pregnancy.

### DON'T

- ▶ Wear jewelry, hairpins, removable dental appliances or clothing with metal, such as zippers or underwire bras. You may be asked to remove your eyeglasses and hearing aids.
- ▶ Eat prior to the test. Depending on the doctor's instructions, you might need to fast from two to 12 hours.

**MORE**

## Still Have Questions?

Learn more about the advanced imaging available at Baylor Scott & White Health. Visit [BaylorHealth.com/Imaging](http://BaylorHealth.com/Imaging) (North Texas) or [radiology.sw.org](http://radiology.sw.org) (Central Texas).

# 40,203

The number of Texans who died in 2013 from heart disease—the state's and country's No. 1 killer.

**Eat away at heart disease by consuming a diet low in saturated fat, cholesterol, sugar and sodium, and high in fruits, vegetables, whole grains, fish, nuts, seeds and legumes.**



# Finding the One

**A primary care physician will be there for you in sickness and in health. Here's how to choose the best one for you**

**→** Quick, who's your doctor? Don't know or don't have one? You're doing your health a disservice.

Why? Because people who have a primary care provider (PCP) tend to seek more preventive care and therefore fare better than those who don't, says Robert M. Wiprud, MD, director, division of family medicine, College Station. The key is finding the right provider for you.

**Q: What type of physician should I look for?**

That depends on your age and convenience factors, Dr. Wiprud says.

"Children can go to a pediatrician or a family medicine doctor. Adults can go to family doctors or internal medicine physicians," he says. "If you have a family, would you like one doctor to see everyone in the family? If so, family medicine is the way to go."

**Q: What are the most important things to look for in a physician?**

You'll want to make sure you choose a physician who takes your insurance. Beyond that, "it's more of a personality thing," Dr. Wiprud says. "You need to find someone that you feel comfortable with, a physician who listens to you."

Start by asking friends and family for referrals and doing some research. "Most practices will have online

resources that tell you a little bit about the physician and his or her training background and interests," Dr. Wiprud says.

Then schedule an initial appointment to see whether you get along in person. And just as important, do you like the office staff?

"That's a huge part of your interaction with the physician," Dr. Wiprud says. "Make sure the staff is friendly and is not a barrier between you and your physician."

**Q: Do women need a primary care physician in addition to an Ob-Gyn?**

In short, yes. During childbearing years, you may see your Ob-Gyn more frequently than your primary care physician, but it's still important to maintain a relationship with a family doctor.

"You can go to your Ob-Gyn for a lot of needs," Dr. Wiprud says. "But your family doctor can care for your other medical needs in addition to your basic reproductive health."

**MORE**

**Have You Found the One?**

Visit [primarycare.sw.org](http://primarycare.sw.org) to learn more about adult, pediatric and family primary care physicians at Scott & White Healthcare.







# Clearing the Air

## Deflating the three most common asthma myths

WHETHER YOU'VE HAD ASTHMA recently diagnosed or you are taking care of an asthmatic child, understanding the disease—and its limitations—can help you manage it more effectively. We asked Mark Millard, MD, medical director of the Baylor Martha Foster Lung Care Center in Dallas, to separate fact from fiction.

**MYTH 1:** I only have to take my medicine when I'm sick.

**FACT:** “The first symptom of asthma can be a severe attack that lands you in the emergency room or hospital,” Dr. Millard says. “Daily controller therapy, which usually includes an inhaled corticosteroid, reduces the chance of emergency room visits, hospitalizations and even asthma-related death.”



**MYTH 2:** I can't exercise because I have asthma.

**FACT:** “You're not allergic to exercise! If exercise frequently triggers attacks for you, chances are your asthma isn't properly managed,” he says. By controlling your asthma, you should be able to exercise without fear of an attack.

**MYTH 3:** I will “outgrow” my asthma.

**FACT:** Although about half of children with asthma do experience significant improvement in their condition when they hit adolescence, about one-third will have a recurrence in later years. “Actually, more adults have asthma than children,” Dr. Millard says.

### FOLLOW THE RULES

Both people with asthma and their caregivers need to be on the same page in terms of what good asthma control looks like. Dr. Millard recommends following the Rules of Two® protocol:

### ASTHMA ACTING UP?

Visit [allergy.sw.org](http://allergy.sw.org) or call **979.207.4000** to locate an allergist in the College Station area and schedule an appointment.

- ▶ Do you have symptoms or use your quick-relief inhaler more than TWO times a week?
- ▶ Do you wake up at night with asthma symptoms more than TWO times a month?
- ▶ Does your peak flow measure less than TWO times 10 (that is, 20 percent) from baseline with asthma symptoms?
- ▶ Do you need prednisone TWO or more times a year to treat asthma flares?

Answering yes to any of these questions means you aren't in good asthma control and should talk to your doctor, Dr. Millard says.



A stroke can strike anyone, anytime—and it requires immediate action

# Time Sensitive

➔ STEFAN LEROW REMEMBERS March 7, 2012, not just because it was his wife’s birthday, but also because it was the day she may have saved his life—by recognizing he was having a stroke and insisting he get help immediately.

Looking back, LeRow realizes there were early signs that something wasn’t quite right that day. He had pain behind one eye and saw red dots in his peripheral vision. But he shrugged those off, dropping the kids off at school and going to work.

When he met his wife, Vanessa, at home for lunch, however, she noticed a problem.

“She asked me why I was slurring my words, and when I started to say that I knew I was slurring but I was trying not to, I couldn’t get the words out,” LeRow recalls. “Vanessa said, ‘We need to get to the hospital right away.’”

He objected at first, but Vanessa persisted, especially when she realized his face was drooping. They headed straight for the hospital closest to their home in Waco: Baylor Scott & White Hillcrest Medical Center.

Within 45 minutes, the team there had taken a CT scan to look at LeRow’s brain, confirmed that he was having a stroke and administered an intravenous drug called tPA, short for tissue plasminogen activator. The drug dissolved the clot that was blocking blood flow to LeRow’s brain and causing the stroke.

“They not only saved my life. They saved my quality of life,” LeRow says. “Later I found out that they classified it as a nine out of 10 on the scale of blockages, but because everyone acted so quickly I didn’t lose any function and I didn’t even need rehabilitation.”



“They not only saved my life. They saved my quality of life.”

—Stefan LeRow

Other less common symptoms include difficulty walking, dizziness, double vision, ringing in the ears or a sudden, severe headache, Dr. Noonan says. These symptoms warrant immediate medical attention as well.

### STROKE DOESN'T DISCRIMINATE

LeRow is a prime example of the fact that stroke can happen to anyone. The marathon runner was only 38 years old when he had his stroke. He was in excellent health and had none of the typical risk factors, which include a family history of stroke and a personal history of stroke or heart attack.

Controllable risk factors are smoking, high blood pressure, high cholesterol and diabetes, Dr. Noonan says. You can reduce your chance of having a stroke by quitting smoking; keeping your blood pressure, cholesterol and blood sugar in a healthy range; and losing excess weight.

But if you notice the signs of stroke in yourself or someone else, the importance of acting quickly can't be overstated. For tPA to work, it has to be administered within four and a half hours—ideally, much less. If tPA doesn't dissolve the clot or if you have health issues that prevent doctors from using the drug, they have other techniques for removing blockages and restoring blood flow to the brain.

“There are a lot of treatment options that weren't available 15 years ago,” Dr. Noonan says, “and we have them all here.”

## 3 WAYS TO CUT YOUR STROKE RISK

Is a stroke in your future? Bao Le, DO, a cardiologist on the medical staff at Scott & White Hospital – College Station, shares three ways you can go on the offensive to reduce your risk.

**1 Kick bad habits.** Smoking doubles risk of stroke, and several studies have linked consumption of alcohol to an increased risk. “Commit to quitting smoking, and limit your consumption of alcohol to one drink per day for women, two for men,” Dr. Le says. “Hypertension also increases stroke risk, so limit salt intake whenever possible.”

**2 Get moving.** A recent study suggests that individuals who exercise at least five times per week are at a lower stroke risk than their sedentary counterparts. To reduce your risk, follow the Centers for Disease Control's recommendation of 150 minutes of moderate-intensity or 75 minutes of vigorous-intensity activity per week, along with two days of weight training.

**3 Stay slim.** “Being overweight makes you more likely to have high blood pressure, cholesterol and diabetes—all three of which can increase your risk of stroke,” Dr. Le says. So eat a healthy, balanced diet, watch your weight and see your primary care physician regularly to monitor your cholesterol, blood sugar and blood pressure levels.



### EVERY SECOND COUNTS

Taking immediate action is critical if someone is having a stroke, says Patrick Noonan Jr., MD, an interventional neuroradiologist on the medical staff at Scott & White Memorial Hospital – Temple.

“Time is brain,” he says. “The longer you ignore the symptoms of a stroke, the less brain we can save.”

The American Stroke Association created the FAST acronym to help everyone recognize the symptoms of a stroke. FAST stands for Face drooping, Arm weakness, Speech difficulty and Time to call 911.

**MORE**

### See the Signs

To learn more about the warning signs for stroke and heart attack, visit [stroke.sw.org](http://stroke.sw.org).



# Game Plan for Good Health

**Guys: Here are your biggest health threats—and what you can do about them**

➔ WHEN IT COMES TO STAYING WELL, women usually fare better than men. But is the fairer sex simply healthier by nature, or are there other factors involved?

“I don’t know that gender really plays a role, other than in the way health care is utilized. Men tend to wait until things get bad, where with women, we tend

to find problems earlier because they come and get them checked out” as part of their annual exams, says Raymond J. Harrison, MD, MBA, an internal medicine physician at Baylor Scott & White Clinic – Copperas Cove.

Guys, you don’t have to wait until things get bad. Do yourself and your family a favor and set aside two hours every year to see a

doctor and make sure everything is A-OK—and if it’s not OK, to get professional advice on how to be healthy. In the meantime, before your next checkup (you *have* made that appointment, right?), here is a heads-up about some of the biggest health threats facing men—diabetes, heart disease and cancer—and how you can reduce your risk.



## DIABETES

**KNOW YOUR RISKS:** Being overweight or obese; having high blood sugar, high blood pressure and high cholesterol; and aging are among the biggest risk factors. Bigger still are genetic predisposition and race, Dr. Harrison says. “For example, people of Hispanic descent and Pacific Islanders are more likely to develop diabetes than people of European descent.” African-Americans, Asian-Americans and American Indians are also at greater risk, according to the American Diabetes Association.

**TAKE ACTION:** Controlling your blood sugar, blood pressure and cholesterol and eating a healthy diet are key, as are exercising regularly and maintaining a healthy weight. In fact, losing just 5 to 10 percent of your body weight (that’s 10 to 20 pounds for a 200-pound man) can significantly reduce your risk. “For anybody who has the genetic predisposition to diabetes, as soon as they lose the weight, most of the time their diabetes goes into remission,” Dr. Harrison says. “And one of the interesting things we see in patients with diabetes who have gastric



Losing just **5-10%** of your body weight can significantly reduce your risk for diabetes.

bypass surgery is that within a week or two it’s in remission.”

## HEART DISEASE

**KNOW YOUR RISKS:** Men are more likely than women to develop heart disease and to have a heart attack. Besides gender, other risk factors include smoking and having diabetes.

**TAKE ACTION:** Quitting tobacco, eating a healthy diet, exercising, and controlling your blood pressure and cholesterol will go a long way. And these steps are also effective in controlling diabetes. “Diabetes is a big risk factor for heart disease,”

Dr. Harrison says. “We worry less about the blood sugar and more about the damage from diabetes to the kidneys and vascular system.”

## CANCER

**KNOW YOUR RISKS:** Men have a greater risk of dying from cancer in general—a 22.8 percent lifetime risk on average versus a woman’s 19.3 percent. Although risk factors vary based on the type of disease, many fall in line with those for heart disease and diabetes, including tobacco use, being overweight or obese, and aging. Heavy or regular alcohol consumption also contributes.

**TAKE ACTION:** As with heart disease and diabetes, eating a healthy diet, maintaining a healthy weight and exercising regularly can help cut your cancer risk. Getting recommended cancer screenings is also critical, along with being safe in the sun to reduce your skin cancer risks. But Dr. Harrison prioritizes one preventive measure above the rest: “Quit smoking and avoid all tobacco products,” he says. “It’s a primary risk factor for lung cancer, head and neck cancer, and heart disease.”

## THE 3 EXERCISE MISTAKES YOU MIGHT BE MAKING

Getting to the gym is only half the battle. The other half? Making sure you’re getting the most out of your workout. Here, Boone Barrow, MD, a primary care and sports medicine specialist at Scott & White Clinic – University Drive, shares the three biggest workout mistakes you might be making.

**1. Overtraining.** “Doing the same thing over and over—like running—can result in overuse injuries,” Dr. Barrow says. “Varying your program can help decrease the likelihood of injury and burnout.”

**2. Skipping the cool-down.** Most people remember to warm up before working out, but many fail to cool down afterward. That can result in dizziness, increased soreness and reduced

flexibility in the long run, Dr. Barrow says.

### 3. Not eating right.

“The fuel you put into your body determines how well you perform and how good your results will be,” Dr. Barrow says. “If you’re eating junk, you’re not going to lose weight as easily and you’ll hinder your performance.”



**MORE**

### Don’t Get Sidelined

Visit [sportsmedicine.sw.org](https://sportsmedicine.sw.org) to learn more about the sports medicine services Scott & White offers in the College Station area.

# Hitting the Mark

**A simple blood test could improve treatment for people with late-stage colon cancer**

Colon cancer is widely considered one of the most preventable and curable cancers, and yet it remains the second-leading cause of cancer death in the U.S. Why?

“We don’t have good compliance with colonoscopy screening recommendations, which can identify colon cancer in the early stages, when it’s most treatable,” says Ajay Goel, PhD, director of the center for gastrointestinal cancer research and the center for epigenetics, cancer prevention and cancer

genomics at the Baylor Research Institute.

“More than half of all cases aren’t diagnosed until late stages, when the prognosis is poor.”

## SEEING THE OPPORTUNITY

At stage 3, colon cancer has advanced to the lymph nodes and treatment success is unpredictable, Dr. Goel says. “There’s no sure way to tell which cancers will remain

in the lymph nodes and which will metastasize [spread to other organs],” he says. “Being too conservative can fail to stop an aggressive cancer from metastasizing, but being too aggressive can be toxic, even deadly.”

Finding a way to identify people whose cancers are likely to be aggressive—and treating them accordingly—would be invaluable. And that’s exactly what Dr. Goel and his team set out to do.

“A few years ago, we developed a blood screening test for colon cancer that identified genetic markers in individuals who would develop polyps and cancers,” he says. “We wanted to see if we could find similar markers in patients whose cancers would metastasize.”

## MAKING THE CONNECTION

Dr. Goel and his team compared primary colon cancer tissue samples with metastasized liver tissue samples from 67 patients—something he says few researchers have done before. They were able to identify three markers present in both tissue samples, indicating that people with these markers would go on to develop metastasis. “We even found one that could be identified with a simple blood test,” he says.

## ABOUT THE STUDY

### Identification of Metastasis-Specific MicroRNA Signature in Human Colorectal Cancer

Three genetic markers are used to predict which colon cancer patients will develop an aggressive form of the disease.

#### Key Players

National Cancer Institute

Baylor Research Institute

## MORE

### Research in Action

Visit [BaylorHealth.com/AdvancingMedicine](http://BaylorHealth.com/AdvancingMedicine) and [clinicaltrials.sw.org](http://clinicaltrials.sw.org) for more medical breakthroughs happening at Baylor Scott & White.

The team’s findings are scheduled to be published in the *Journal of the National Cancer Institute*. In the future, the information could be used to test people with stage 2 and 3 cancers to identify those who should be treated aggressively with more effective chemotherapy drugs, and those who are likely to respond to conservative therapies.

“It’s my sincerest hope,” he says, “that our research can help increase survival rates for patients with colon cancer in the years to come.”





ONLINE

## SUNBLOCK VS. SUNSCREEN

Our experts break down the difference to help you keep your skin safe this summer.

→ Go to [sunscreensw.org](http://sunscreensw.org) to get the 411.

BLOG

## CONNECT AND SHARE

At our blog, get health and wellness tips, find information on community events, read inspiring patient testimonials, watch videos and more.

→ Read it now at [community.sw.org](http://community.sw.org)—and don't forget to subscribe!



CLASSES

## Baby on the Way?

Scott & White in College Station and Brenham offer one-day classes for childbirth, breastfeeding, baby care and infant CPR, as well as sibling classes, daddy boot camps and hospital tours.

→ Explore what's available at [babyclasses.sw.org](http://babyclasses.sw.org) today.

WELLNESS

## DON'T WAIT FOR THAT SPORTS PHYSICAL

Do your children participate in team sports? Beat the August rush by scheduling their sports physicals early. You can even combine their sports physical and well-child checkup into one convenient appointment.



Head to [swchildrens.org/physicals](http://swchildrens.org/physicals) to learn about the benefits of well-child checkups, sports physicals and more.



DONATE

## GIVING BLOOD FEELS GOOD

Summer is particularly demanding on Scott & White Blood Center's blood supply, leading to an urgent, sometimes critical need for donations. Blood drives are held in College Station monthly, with upcoming drives on May 26 and 27, and June 23.

→ Visit [bloodcenter.sw.org](http://bloodcenter.sw.org) for more information and to determine your eligibility to donate.

# Community Calendar

## June & July 2015

Registration required for all events unless otherwise indicated.

→ Email [csbabies@sw.org](mailto:csbabies@sw.org) for all childbirth classes.

### CHILDBIRTH AND FAMILY EDUCATION

**Childbirthing Class** This is the first class in a three-part series, beginning June 2, 7 to 9 p.m. The additional classes meet the following two Tuesdays. No charge. Classes also held on June 27, July 7 and July 18, 9 a.m. to 4 p.m.

**College Station Hospital Tour** Scott & White – College Station Hospital, 700 Scott & White Drive, College Station. Expectant families are invited to take a tour to prepare for the big day. June 4 and July 2, 6 to 6:30 p.m. No charge.

**Breastfeeding Class** One-session introduction to breastfeeding. Dads or other primary support persons are encouraged to attend. June 13 and July 11, 9 a.m. to noon. No charge.

**Baby Care Class** Offered to parents in their last trimester. Both parents are encouraged to attend. June 4 and July 2, 10 a.m. to 12:30 p.m. No charge.

**Daddy Boot Camp A** prenatal workshop for new dads. This course is designed to meet the changing needs of today's dads. July 11, 10 a.m. to 12:30 p.m. No charge.

**Sibling Class** Interactive class offers guidance and information to help your child welcome the new baby into the family. Ideal for families with children ages 2 – 7. June 6, 10 to 11:30 a.m. No charge.

**Infant CPR Class** Provided by Brazos Valley CPR & Training, this class covers infant CPR and infant choking. \$20 per person or \$30 per couple. June 11 and July 16, 7 to 9 p.m.

**Safe Driving Classes** Provided by AARP. Learn how to refresh your driving skills. June 9, 9:30 a.m. to 2:30 p.m. \$15 for AARP members and \$20 for non-members. To register, call **979-207-0122** or email [kparker@sw.org](mailto:kparker@sw.org).

### HEALTH AND WELLNESS

**Farmer's Market** Find locally grown, farm-fresh produce and products every Tuesday and Friday. Scott & White Hospital – College Station, west side parking lot, noon to 5:30 p.m.

# Beat the RUSH!

## Schedule your child's sports physical now!

Call us today at **979-691-3000**

By the end of summer vacation, doctors' offices are overwhelmed with families trying to schedule checkups, sports physicals and immunizations. Schedule your appointments now to avoid the rush. We offer two convenient locations:

**McLane Children's  
Scott & White Clinic -  
University Drive**  
1700 University Drive East  
Entrance 15, First Floor, Desk P  
College Station, TX 77840

**McLane Children's  
Scott & White Clinic -  
Rock Prairie**  
800 Scott & White Drive  
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[swchildrens.org/cs](http://swchildrens.org/cs)



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