“Looking back, I can see those signs of stroke that I didn’t pay attention to.”

Judy Buck
wants people to be more vigilant about seeing a doctor
PAGE 6
Health Care Excellence By Example

Baylor Scott & White Health has been ranked the 10th healthiest employer in America by Healthiest Employer LLC, based on the health system’s exceptional culture and employee wellness programs.

More than 5,000 employers applied to make the list of 2015 Healthiest 100 Workplaces in America, which is awarded for companies’ corporate vision, culture and engagement, learning, expertise, metrics and technology.

Baylor Scott & White Health’s employee wellness program includes interactive health websites, on-site health screenings and fitness competitions, and personal wellness coaching. Since 2007, the program has helped employees reduce their risk for health problems and collectively lose more than 18,000 pounds.

“We’re honored to be nationally recognized for our commitment to improving the health and wellness of our 34,000-plus employees,” says Becky Hall, vice president of wellness for Baylor Scott & White Health. “As a top provider of quality health care in Texas, we strive to set the standard for health and wellness in the communities we serve.”

Discover Your Dream Job
Are you passionate about health care? To search for job openings at Baylor Scott & White Health and to learn about the benefits of working with us, visit BaylorHealth.com/Careers today.
**How Healthy Are You?**

If you haven’t had a checkup in a while, it can be hard to know where you fall on the health spectrum. Thankfully, there’s an easy way to get a gauge—without leaving home.

Baylor Scott & White Health offers numerous online health risk assessments at BaylorHealth.com/RiskAssessments that allow you to estimate your risk for everything from acid reflux to osteoporosis.

For each assessment, you’ll be asked to answer a handful of questions about your age, weight and lifestyle habits. In a matter of seconds, you’ll receive your results and information about what steps to take next, including visiting your doctor. It’s that quick and easy.

**Check Your Risk with a Click**

Visit BaylorHealth.com/RiskAssessments to find out your risk level for a variety of conditions such as cancer, diabetes and depression.

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**Baby Can Wait**

When it comes to pregnancy, every week matters to your baby’s health. That means week 37 is just as important as weeks 39 and 40. Acknowledging this, the American Congress of Obstetricians and Gynecologists recommends against induced labor before 39 weeks, except when medically necessary (such as when your water breaks or a complication like preeclampsia develops). Previously, it was thought that babies born anytime between 37 to 42 weeks had the same health results, but recent research shows that’s not the case.

Need more persuading? Here are two very good reasons to wait until at least 39 weeks to give birth:

1. **You’ll give the baby time to develop.** In the last few weeks of gestation, the baby’s lungs and brain are still maturing. Waiting gives these crucial organs time to fully form.

2. **The chances of having a healthy baby go up.** Research shows that the magic window (now considered full term) is 39 weeks 0 days to 40 weeks 6 days. Babies born within this time frame had the best results.

**MORE**

**GET READY FOR THE ARRIVAL**

Sign up for classes on childbirth and breastfeeding or take a maternity tour. Visit BaylorScottandWhite.com/ParentEd for locations and times near you.

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**20%** Women can lose 20 percent of their bone density in the five to seven years after menopause. In honor of National Osteoporosis Month (May), protect your bones by committing to an exercise regimen. Weight-bearing activities are best (think: walking, dancing, doing yoga). Also, stop smoking—tobacco use lowers estrogen levels and weakens your bones.
LUB-DUB. LUB-DUB.
Lub-dub. The sound of our heartbeat is something most of us don’t think much about. But for the millions of people in the U.S. who have atrial fibrillation, it’s a very real concern.

“Atrial fibrillation, also known as AF or A-Fib, is a condition in which the heart beats in an irregular and often rapid manner,” explains Kevin Wheelan, MD, chief of the Division of Cardiology at Baylor University Medical Center at Dallas. “This is caused by an electrical short in the rhythm-control portion of the heart.”

Here, we explain everything you need to know about atrial fibrillation.

WHO’S AT RISK?
There are several factors that can increase your risk of A-Fib. “We often see atrial fibrillation in those with other heart conditions, like high blood pressure, heart failure, coronary artery disease, heart valve disease, cardiomyopathy and congenital heart disease, as well as those who’ve had previous heart surgeries,” Dr. Wheelan says.

“Overconsumption of alcohol also increases your risk.”
People with chronic lung disease and pulmonary embolism also appear to be at increased risk.

SYMPTOMS AND DIAGNOSIS
For some people, A-Fib doesn’t cause any noticeable symptoms, but others may experience heart palpitations, shortness of breath, lightheadedness, fatigue or chest discomfort.

“Typically, A-Fib starts as brief occurrences that are easy to ignore,” Dr. Wheelan says. “This often results in people not getting diagnosed until the condition has become dangerous.”

A-Fib can be diagnosed in a doctor’s office through a brief, painless, noninvasive test called an electrocardiogram or by wearing a monitor that can record information about your heartbeat.

TREATMENT AND PROGNOSIS
Despite its mild symptoms, A-Fib is a serious medical condition that should be addressed as soon as possible. “Untreated, A-Fib significantly increases your risk for stroke and other conditions due to the increased likelihood of blood clots,” Dr. Wheelan explains. “It also increases your risk of heart failure.”

Treatments may include medications; electrical cardioversion, a noninvasive procedure that can “reset” the heart’s rhythm; or ablation, an invasive procedure that can neutralize the short circuit in the heart.

“The good news is that with proper treatment, most people with A-Fib go on to live long and healthy lives,” Dr. Wheelan says. If you’re concerned, talk to your doctor.
FAR TOO LONG, cancer ruled your life. All your energy, all your brainpower—all your you—have been focused on treatment, appointments, side effects and cell counts. But now you’re cancer-free! As much as you want to revel in the joys of survivorship, you realize this part of the journey can be difficult in its own way. Here are four bits of advice as you begin to adjust.

1 Own your emotions. You just got the best news of your life, and yet you feel uneasy. That’s OK. “It’s normal to be anxious when you’re in remission,” says Mark Holguin, MD, medical director of the oncology service line for Baylor Scott & White Health – Central Division. “There often is great concern about the cancer coming back and how you’ll know if it does.”

Don’t hesitate to call your doctor to ask about what’s normal and what’s not, even if it turns out to be a simple ache or a seasonal cough. And talk to someone about how you’re feeling. Join a support group or confide in a fellow survivor who can understand where you’ve been.

2 Take care of yourself. Eat a plant-based diet that’s rich in antioxidants and fiber, and choose lean meats and low-fat dairy products. Find a physical activity you enjoy, such as swimming, biking, walking or yoga. Proper self-care will help you feel good and also may boost your recovery from lingering side effects of treatment.

“And there’s a growing body of evidence that suggests regular physical activity may be associated with a reduced risk of recurrence,” says Dr. Holguin, who recommends getting at least 30 minutes per day three to five days a week.

3 Keep up with follow-ups. “Most of the cancers we treat have at least some risk of recurrence,” Dr. Holguin says. “Remission is the first step to cure, but we have to maintain that remission long enough to be sure it’s not going to come back. It’s wise for people to be vigilant about follow-ups so that we may catch recurrences early.”

4 Enjoy life. You might discover that you have a lot more time on your hands now that you’re not going to so many appointments. Use your freer schedule to do all the things you dreamed about during treatment. Or maybe you realize that what was important to you before the diagnosis has changed now. In either case, pursuing enjoyable outlets can be life-affirming.
REAL PATIENTS. REAL STORIES.

Mind the Warning Signs

Stroke symptoms can begin long before a life-threatening brain attack occurs. Are you paying attention?

IT WAS A NORMAL SATURDAY in August 2013. Judy Buck was in her kitchen making a grocery list. Then, her left side “felt like it weighed 500 pounds,” she recalls. “I kept writing, and it kept getting heavier and heavier.” She called for her husband, Billy.

“Something’s not right,” she told him. He agreed and suggested going to the hospital. Buck, now 66, wasn’t so sure.

“But then, my face started drooping,” she says. “And I thought, well, maybe I will go and get checked out.”

When they got to Baylor Scott & White Medical Center – Irving, the staff recognized the paralysis on her left side and her drooping face as two symptoms of a stroke—a life-threatening medical condition.

“I never thought it could be a stroke,” Buck says. But now, with more knowledge about these brain attacks, she realizes the earliest symptoms may have started a couple of weeks before.

“If I had to do it over again, I’d have gone to the doctor two weeks before my stroke.” —Judy Buck

SYMPTOMS

In addition to a drooping face and weakness on one side of the body, stroke symptoms can include difficulty speaking or understanding, loss of balance, difficulty walking and trouble seeing. The sudden onset of an explosive headache also can be a sign, says Dion Graybeal, MD, medical director for stroke for Baylor Scott & White Health – North Texas.

“...and she went to the hospital.”

When these symptoms come and go within a few minutes, it could be a transient ischemic attack, or TIA. Combined with other stroke risk factors, a TIA is correlated with a much higher risk of stroke. “It could happen in the next two days, the next week or even the next month,” Dr. Graybeal says.

Buck realizes the curious symptoms she experienced in the days leading up to her stroke were likely TIAs, or ministrokes.

“I did have a little bit of numbness on my left side. I thought it was just because I sat at the computer too long. And I had horrible headaches,” she says. “Looking back, I can see those signs of stroke that I didn’t pay attention to.”

If you’re having stroke symptoms that persist, call 911. If your symptoms are fleeting, it’s still important to see a doctor immediately.

TREATMENT

There are two main types of stroke. During an ischemic stroke (about 85 percent of strokes), a blood clot blocks blood flow to the brain. In a less common hemorrhagic stroke, there’s bleeding in the brain.

Once a stroke has started, the treatments are time sensitive, Dr. Graybeal says. An IV medication called tPA, a “clot-busting” drug, ideally should be given within three hours of the start of symptoms. This treatment saved Buck’s life. Other treatments have different time limits, but it’s all a matter of hours. Getting care quickly helps prevent death and disability.

“You’re losing about 2 million brain cells per minute. Time really is brain,” Dr. Graybeal says. “If we can restore normal blood flow quickly, we can improve functional outcomes.”

PREVENTION

Though there are some risk factors you can’t change (like age and family history), there are a few you do have control over. To reduce your risk, it’s important to not smoke and to effectively manage high blood pressure, diabetes, cholesterol and atrial fibrillation. Keeping these conditions in check may include taking medication as well as exercising, eating healthfully and managing stress.

It’s also important to talk to your primary care physician about regular screenings for blood pressure, diabetes and cholesterol to better understand your risk.

Buck says she sees areas of her life she could’ve improved upon: She worked a lot, remained sedentary for long periods and had a lot of stress.

Today, she stresses less, eats healthier and exercises more, and she’s lost weight.

And although she was always reluctant to go to the doctor for her checkups, she now sees the value—and hopes others do, too.

“It’s so important that people take better care of themselves,” she says. “And take time and listen to what your body is trying to tell you.”
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COMPREHENSIVE STROKE CARE IS HERE
Baylor University Medical Center at Dallas recently received certification as a comprehensive stroke center from DNV GL Healthcare, reflecting the highest level of competence for the treatment of serious stroke events.

This certification is based on standards set forth by the Brain Attack Coalition and the American Stroke Association and affirms that a medical center is equipped to address the full spectrum of stroke care, including diagnosis, treatment, rehabilitation and education.

Comprehensive stroke centers are typically the largest and best-equipped facilities in a geographical area that can treat any kind of stroke or stroke complication.

“It’s critical that we not only have an experienced team of clinicians and resources available, but also that we have the ability to act with extreme timeliness,” says Dion Graybeal, MD, medical director for stroke for Baylor Scott & White Health – North Texas.

“This certification validates the extensive efforts we have made to provide for the health and safety of our patients.”

MORE
Recovery After Stroke
The experienced stroke care team at Baylor Institute for Rehabilitation can help you get back on your feet after a stroke. To learn about the institute’s capabilities, visit BaylorHealth.com/Stroke today.
IRRITABLE BOWEL SYNDROME and inflammatory bowel disease may sound similar—they even share some symptoms—but they are actually very different. Understanding the distinctions between the two gastrointestinal conditions can help you get the relief you need.

WHAT IS IBS?
Irritable bowel syndrome (IBS) occurs when the gastrointestinal tract acts abnormally, causing symptoms such as constipation, diarrhea or alternating bouts of each. It affects around 10 to 15 percent of people in the U.S., according to the International Foundation for Functional Gastrointestinal Disorders, and is often diagnosed in late adolescence or early adulthood.

“IBS is quite common,” says Jason Welch, DO, a gastroenterologist on the medical staff at Baylor Scott & White Medical Center – Marble Falls. “Though many theories exist, there is not a single, identifiable cause, unfortunately, as there is no anatomic disease or bowel inflammation. What we can do is treat the symptoms.”

WHAT IS IBD?
Inflammatory bowel disease (IBD) refers to two conditions that cause inflammation or ulceration along the gastrointestinal tract: Crohn’s disease and ulcerative colitis. Altogether, these conditions affect about 1.6 million Americans, according to the Crohn’s & Colitis Foundation of America.

“IBD carries significant long-term health implications and should be closely managed by a gastroenterologist,” Dr. Welch says.
### IBS and IBD: Comparing the Conditions

<table>
<thead>
<tr>
<th></th>
<th>Irritable Bowel Syndrome</th>
<th>Inflammatory Bowel Disease</th>
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<tbody>
<tr>
<td><strong>Most often affects</strong></td>
<td>Women are twice as likely as men to get it, according to the National Institute of Diabetes and Digestive and Kidney Diseases, and it's most common in those 45 and younger.</td>
<td>Men and women. Ulcerative colitis: people ages 15 to 30 and older than 60, people of Jewish descent and those who have a family member with the disease. Crohn’s disease: people ages 15 to 35 and those who have a family member with the disease.</td>
</tr>
<tr>
<td><strong>Symptoms</strong></td>
<td>Abdominal pain and discomfort; a change in bowel habits; constipation, diarrhea or both; urgent need for a bowel movement; bloating; mucus in the stool; feeling as though bowel movements are incomplete.</td>
<td>Abdominal cramps and pain; constipation; diarrhea; rectal bleeding; urgent need for a bowel movement; feeling as though bowel movements are incomplete; weight loss; loss of appetite; fever; fatigue; night sweats.</td>
</tr>
<tr>
<td><strong>Treatment</strong></td>
<td>Primary: lifestyle changes, including dietary changes and stress management. Secondary: medication, probiotic supplements, counseling and alternative medicine like acupuncture, meditation and yoga. See your doctor regularly to get symptoms under control.</td>
<td>Medication, including anti-inflammatories, immunosuppressants, antibiotics, pain relievers and other prescriptions and supplements. Surgery may be necessary in some cases.</td>
</tr>
<tr>
<td><strong>Raises risk for colon cancer</strong></td>
<td>No. Because it’s classified as a syndrome (a collection of symptoms) rather than a disease, IBS itself does not cause cancer.</td>
<td>Yes, depending on duration and severity. “Once a person has had IBD for 10 to 15 years, he or she will need surveillance colonoscopies every one to two years, even if the disease is under control by then,” says Jason Welch, DO, an internal medicine physician and a gastroenterologist.</td>
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### Stress and Your Stomach

Have you ever felt anxious or stressed to the point of feeling sick to your stomach or needing to run to the restroom? If so, you’ve experienced the connection between your digestive system and your head and why the nervous system of the gut is often referred to as the “second brain.”

“Strong emotions like fear, anxiety and stress can elicit a sudden, physiological response in the digestive system,” explains Lawrence Schiller, MD, chief of the Division of Gastroenterology at Baylor University Medical Center at Dallas. This may result in symptoms like stomachache, nausea, vomiting, constipation and diarrhea. “Emotional stress also can aggravate chronic conditions like irritable bowel syndrome and peptic ulcers,” Dr. Schiller adds.

“In both acute cases of digestive upset and chronic digestive conditions, finding healthy ways to cope with stress and strong emotions is beneficial and can help alleviate symptoms,” he says. “Try deep breathing, taking a walk, spending time with a pet or talking with a friend.”

If your symptoms occur frequently, however, or do not resolve with stress-management techniques, talk to your doctor to rule out other problems.

### Is Your Tummy Trying to Tell You Something?

To learn more about digestive health services at Baylor University Medical Center, visit BaylorHealth.com/DallasDigestive today.
THE EYES HAVE BEEN CALLED windows to the soul. But they are also windows to your health. That’s because by examining blood vessels in the eye, doctors can detect health conditions like diabetes.

Knowing how these blood vessels work normally and under duress is important in helping develop treatments—and that’s the goal of the Ophthalmic Vascular Research Program (OVRP), a collaboration between the Department of Ophthalmology at Baylor Scott & White Health and the departments of Medical Physiology and Surgery at the Texas A&M Health Science Center (TAMHSC).

A UNIQUE TECHNIQUE

The key is to study blood vessels in the eyes independently from other tissues. Lih Kuo, PhD, director of the research program and professor of medical physiology at TAMHSC, is known for his work with isolating microscopic blood vessels from the heart. The OVRP team applied a similar approach to the eye.

“Blood vessels in the heart respond to stimuli in a certain way,” explains Robert Rosa Jr., MD, an ophthalmologist, vice chair for research in the Baylor Scott & White Department of Ophthalmology and a researcher in the OVRP. “The blood vessels in the kidneys may respond differently to the same stimuli; the blood vessels in the eye may respond in yet another way.”

Today, the OVRP is the only research program in the U.S. to use the isolated retinal microvessel technique.

LASTING IMPACT

Diseases like diabetes and high blood pressure affect blood vessels in the eye, damaging the retina (the back of the eye) and leading to impaired vision. Regulating and improving blood flow might help.

“Diabetes is the most common cause of blindness among 20- to 60-year-olds,” Dr. Rosa explains. “Our work could have a significant impact in preserving vision in patients with diabetes.”

What’s more, the OVRP investigators have developed patents that could aid in the establishment of new treatments for other eye diseases, including dry macular degeneration and retinitis pigmentosa.

“Our goal ultimately,” he says, “is to have a lasting impact on patient care and find new therapeutic strategies to prevent blindness from retinal vascular and degenerative diseases.”

ABOUT THE STUDY

Ophthalmic Vascular Research

A team of scientists is better understanding how the blood vessels in the eye work with the goal of finding therapies for people with impaired vision as a result of retinal vascular and degenerative diseases.

Key Contributors

Baylor Scott & White Health
Texas A&M Health Science Center
Scott & White Healthcare Foundation (funding)
Retina Research Foundation (funding)
National Institutes of Health (funding)

A Take a Look at the Latest Research

Visit BaylorHealth.com/AdvancingMedicine and research.sw.org for other advancements like this.
ADVANCING MEDICINE to Your Health

BY EXAMINING BLOOD VESSELS IN THE EYE, A RESEARCH TEAM LOOKS FOR NEW THERAPIES FOR PEOPLE WITH DIABETES AND OTHER CONDITIONS

THE STUDY

ABOUT THE EYES HAVE BEEN CALLED "WINDOWS TO THE SOUL." BUT THEY ARE ALSO "WINDOWS TO YOUR HEALTH." THAT'S BECAUSE BY EXAMINING BLOOD VESSELS IN THE EYE, DOCTORS CAN DETECT HEALTH PROBLEMS EARLY AND THAT'S THE KEY TO PREVENTING BLINDNESS FROM RETINAL VASCULAR DISEASES LIKE DIABETIC RETINOPATHY AND AMD.

A TEAM OF SCIENTISTS IS WORKING WITH THE GOAL OF UNDERSTANDING HOW THESE BLOOD VESSELS WORK AND DEVELOPING TREATMENTS—INCLUDING DRUGS AND OTHER INTERVENTIONS—for people suffering from these diseases and conditions like diabetes.

THE OVRP, A RESEARCH PROGRAM IN THE U.S. TO USE THE ISOLATED RETINAL MICROVESSEL TECHNIQUE, IS KNOWN FOR ITS WORK WITH ISOLATING BLOOD VESSELS FROM THE KIDNEYS. THE RESEARCHER IN THE OVRP, "THE BLOOD VESSELS IN THE HEART CAN RESPOND DIFFERENTLY TO THE SAME STIMULI; THE VESSELS IN THE KIDNEYS MAY RESPOND SIMILARLY TO THE EYE.

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"OUR GOAL ULTIMATELY," HE SAYS, "IS TO HAVE A LASTING IMPACT ON PATIENT CARE AND TO HAVE A LASTING IMPACT ON PATIENT CARE AND TO HAVE A LASTING IMPACT ON PATIENT CARE."

TIPSHEET

HEART-HEALTHY GROCERY LIST

WHEN YOU GO SHOPPING, ARE YOU FILLING YOUR CART WITH FOODS THAT ARE GOOD FOR YOUR TICKER—OR YOUR TUMMY? WITH A LITTLE PLANNING, YOU CAN DO BOTH!

→ Go to BaylorHealth.com/Tipsheet to download our handy checklist.

RECIPE

WATERMELON YOGURT SOUP

THIS COLD SOUP FEATURES A REFRESHING—AND HYDRATING—BLEND OF WATERMELON, CUCUMBER AND YOGURT THAT'S WELL SUITED FOR WARMER WEATHER.

→ Visit BaylorHealth.com/Recipe to find this recipe, plus many more.

ONLINE

A WEALTH OF WELLNESS RESOURCES

→ Find tours, classes, events, support groups and more at BaylorHealth.com/Dallas (click "Classes & Events").

QUIZ

HAVE YOU MADE YOUR HEALTH CARE WISHES KNOWN?

SEE WHAT YOU KNOW ABOUT ADVANCE DIRECTIVES—SUCH AS LIVING WILLS—which are important documents that tell loved ones about your care in the event that you are unable to speak for yourself.

→ Check out BaylorHealth.com/AdvanceDirectiveQuiz to test your knowledge.

WHAT'S ONLINE

BaylorHealth.com/Dallas

FOUR MEDICATION SAFETY TIPS

ADVERSE DRUG REACTIONS ACCOUNT FOR HUNDREDS OF THOUSANDS OF VISITS TO HOSPITALS AND EMERGENCY DEPARTMENTS EVERY YEAR. LEARN THE DOS AND DON'TS OF YOUR DAILY PRESCRIPTION DOSE.

→ Watch the video at BaylorHealth.com/DigitalShort—and share the advice.

GROCERY LIST

HEART-HEALTHY

TIPSHEET

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WATERMELON

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GEAR UP FOR BETTER HEALTH

SATURDAY, JUNE 11 · 8-11 A.M.
Baylor University Medical Center at Dallas
Roberts Hospital, 17th floor - 3500 Gaston Ave., Dallas

Regular checkups should be a part of every man’s routine. Fortunately, our FREE men’s health event makes it simple to tune up your health. Attend It’s a Guy Thing® for free health screenings and information all in one place. This event includes:

• Free health screenings:
  - blood pressure, cholesterol*
  - screening & more!
• Body fat/BMI assessments
• Wellness booths
• Chair massage
• Sports injury evaluations
• Panel discussions with physicians on the medical staff. Topics include:
  - Heart health
  - Orthopedics
  - Cancer care
  - Digestive health

TO REGISTER: Call 1.800.4BAYLOR or go to BaylorScottandWhite.com/GuyThing

*For a more accurate reading, do not eat or drink anything after midnight before the screening. You may take your regular medications as directed.