GARLAND EDITION

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REAL PATIENTS. **REAL** STORIES.

It's Hip to Be Pain-Free

Baylor

Race car driver and businessman ED KENNEDY is back in the driver's seat after hip replacement surgery PAGE 4





IN YOUR CORNER The Cancer Program offers the care you need, close to home PAGE 2



NO MORE EXCUSES Why it's time to stop skipping screenings PAGE 7

A Trusted Partner

Baylor Garland's recognized cancer care program is a strong ally to have when you're fighting cancer

IN DECADES PAST, IF SOMEONE FACING A CANCER DIAGNOSIS was determined to seek "the best" treatment, that usually meant traveling to Houston or to another specialty medical center in the Midwest or Northeast.

That's not the case anymore. Today, thanks to efforts by the Commission on Cancer (CoC), a program of the American College of Surgeons, advanced, comprehensive cancer care is available at many community hospitals across the country, including Baylor Medical Center at Garland.

In April, Baylor Garland underwent an evaluation and on-site review as part of the process of earning CoC accreditation. In addition, the Baylor Garland Breast Center went through an on-site review to become certified by the National Accreditation Program for Breast Centers (NAPBC).

"These accreditations assure patients that they're receiving cancer care according to the latest national standards," says Ethel Randall, director of breast imaging for Baylor Health Care System.

COMPREHENSIVE, COMPASSIONATE CARE

Hospitals that voluntarily participate in CoC accreditation deliver cancer care from a multidisciplinary team

What Baylor Garland's Cancer Accreditation Means to You

- Comprehensive care with advanced services and equipment
- A multidisciplinary team approach
- Information about ongoing cancer clinical trials and new treatment options
- Access to prevention and early detection programs, cancer education and support services
- A cancer registry that offers lifelong patient follow-up
- Ongoing monitoring and improvements in cancer care
- Quality care, close to home

of specialists—primary care doctors, oncology nurses, pathologists, oncologists, surgeons and diagnostic radiologists—who work collaboratively to ensure each patient receives individualized treatment.

"There are so many levels of care for the cancer patient, and we want to make sure we excel in every aspect of their care. Our multidisciplinary cancer committee meets each month to make sure that all angles have been addressed and no stone left unturned," says Jennifer McNeill, MD, a breast surgeon on the medical staff at Baylor Garland.

"Patients should have the confidence that Baylor Garland is following appropriate quality standards in cancer



treatment," says Sashidhar Reddy, MD, a hematologic oncologist on the medical staff at Baylor Garland and chair of the Baylor Garland Cancer Committee.

NAVIGATING THE JOURNEY

For women with breast cancer, keeping track of their medications, imaging exams and appointments can be a daunting task, especially if they're not feeling well or require services like transportation or translation. But when someone can lift that burden off their shoulders, they can concentrate on feeling better.

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Baylor Health Care System Mission: Founded as a Christian ministry of healing, Baylor Health Care System exists to serve all people through exemplary health care, education, research and community service. Visit BaylorHealth.com or call 1.800.4BAYLOR for information about Baylor Medical Center at Garland services, upcoming events, physician referrals, career opportunities and more.

The Commission on Cancer, a consortium of professional organizations whose objective is to improve survival and quality of life for cancer patients, was established in 1922 by the American College of Surgeons.

> "When I started working as a nurse navigator for breast cancer, I just knew this was something the patients were going to love," Johnson says. "I love it, too."

CARE CLOSE TO HOME

Earning these accreditations is just the beginning for cancer care at Baylor Garland.

"Working towards CoC and NAPBC accreditation pushes us to constantly improve delivery of cancer care by investing in quality measurement, continuing education and efficiency," says Dr. Reddy. "We continue to strive to improve ourselves so we can better care for our patients."

And when your care is local, your family members and friends can be there to support you. "I don't think any of those places offer anything that Baylor doesn't offer," says Randall about cancer centers in other states.

"We are dedicated to our patients, and we want to ensure that they feel safe, comfortable and confident with their care," says Dr. McNeill. "I have found the patients who come to Garland for their cancer care to be strong, courageous, generous and inspirational. They are the reason I get out of bed and come to work each day."

Battling Cancer? Get the Help You Need

To learn more about oncology services offered at Baylor Garland, visit **BaylorHealth.com/GarlandCancer**.

That's why one requirement for the NAPBC accreditation is having a breast cancer nurse navigator on staff to serve as a partner and guide for women on their journey through breast cancer treatment. "I started in December and am following 42 patients now," says Sue Johnson, RN, MBA, the breast cancer nurse navigator at the Baylor Garland



Breast Center. Every day, she:

- Schedules and attends breast biopsy appointments
- Coordinates patients' imaging tests and appointments with physicians
- Gives each woman an American Cancer Society organizer, packed with information on cancer treatment and resources as well as dividers for appointments, medications and notes
- Gives each woman a heart-shaped pillow to help with chest soreness after a lumpectomy or mastectomy
- Is a source for information on community resources and support groups

Johnson follows up with her patients regularly throughout their treatment and recovery, always willing to answer questions, pat someone's back or hold a hand. She has already followed several women from their initial diagnosis through successful surgery and radiation therapy.

Have No Fear

Worried about joint replacement surgery? We'll put you at ease

When entrepreneur and race car driver Ed Kennedy found out last year that he needed joint replacement surgery on his right hip, he was ready to act fast. The momentum came from a powerful testimonial: his own left hip replacement more than a decade before.

Kennedy, who says he is "61 going on 30," was

Hear More of Ed's Story

To watch a video about Ed's story, visit BaylorHealth.com/ Healthcast today. hesitant about surgery the first time around. "I'm always on the go, going 100 miles an hour every day of the week. To be tied up recovering from surgery sounded like being put in jail."

But the Coppell resident knew he had to do something. His hip pain was constant, disrupting

his sleep and making it hard for him to walk or even sit through a movie with his wife.

After the first operation, "it was like hitting a switch," Kennedy says. "The pain was gone. The second time around, I couldn't wait for that relief."

Thanks to hip replacement, Kennedy came out of semiretirement to run several businesses, including a water park in Florida. He still races at Daytona and Talladega every year.

After hip replacement surgery, Ed Kennedy is back to doing the things he enjoys, including watching movies with his wife, Pam.

FEARS VERSUS FACTS

Joint pain like Kennedy's occurs when the cartilage that cushions joints is damaged by arthritis, meaning bone rubs directly on bone, causing pain and dysfunction. If conservative treatments such as medication or physical therapy aren't enough, joint replacement surgery is an option to relieve pain and restore function.

If you are considering having joint replacement surgery but you're afraid as Kennedy was years ago—to take that next step, let us help you put your fears to rest.

FEAR #1 THE SURGERY ITSELF

Joint replacement is one of the most common and successful orthopedic surgeries, according to the Centers for Disease Control and Prevention. "Ninety to 95 percent of the time, people have a good to excellent result," says Marc S. Goldman, MD, an orthopedic surgeon on the medical staff at Baylor University Medical Center at Dallas.

Fear of pain can make people hesitant to head to the operating room. "Compared to a decade ago, we do more to control postoperative pain than we used to," says Jeffrey D. Moffett, MD, an orthopedic surgeon on the medical staff at Baylor Regional Medical Center at Grapevine. Options include oral pain medication, injections, self-administered pain pumps and nerve blocks, which may be used in combination.

The short-term pain of recovery can actually be a welcome change from the chronic pain of arthritis. "Patients tell me, 'My pain is so different now. I can feel that it gets better day by day, and the pain I had before only got worse,'" Dr. Moffett says.

FEAR #2 THE RECOVERY PROCESS

If you sympathize with Kennedy's fear that recovering from surgery would feel like being jailed, take heart: "People think they're going to be down for a long period of time," says Charles E. Toulson, MD, an orthopedic surgeon and medical director of the Total Joint Replacement Center at Baylor Regional Medical Center at Plano. "At Baylor, we use advanced techniques, so patients are returning to an active lifestyle much more quickly than before."

Typically, patients go home from the hospital in two to three days and participate in outpatient rehabilitation three times a week for the first month, Dr. Goldman says.

"Once you get past that first month, people are often already better than they were before the surgery," Dr. Moffett says. "The full recovery is somewhere between three and six months."

FEAR #3 MY ACTIVITY LEVEL WILL CHANGE

You're right about this one—but most likely it will change for the better! It's true that avoiding high-impact activities reduces wear and tear on the joint, but in general, joint replacement helps people stay more active, not less.

"Arthritis is generally a progressive problem that gets worse as time goes by," Dr. Moffett says. By undergoing joint replacement surgery, "you're looking at a short-term hardship for a long-term gain."

After 20 years, 93 percent of knee replacements and 95 percent of hip replacements are still functioning well, based on current information. With new technology, today's implants have the potential to last even longer.

"Joint replacement surgery changes people's lives," Dr. Goldman says. "Most people say, 'I wish I'd done it sooner.'"

Rehabilitation: A Plan for Success

Lift! Bend! Pull! Physical rehabilitation is definitely hard work. But you can't argue with the success achieved by the physical, occupational and speech therapists on the staff at Baylor Medical Center at Garland. The team includes experienced 25-year veterans as well as recently trained graduates who are up on the latest research and therapeutic techniques.

Whether the ultimate result is being independent with everyday activities at home or returning to a job, "we work with patients to reach their functional goals," says Grant Sutton, PT, a physical therapist on the staff at Baylor Medical Center at Garland.

For orthopedic patients, depending on their injury or surgery, "we work on range of motion, muscle strengthening, and balance activities, with the ultimate goal of returning to their prior level of function and returning to work," says Ami Sheth, PT, MPT, a physical therapist on the staff at Baylor Garland. "We also want them to be able to use a walker or cane safely, and to continue their therapy independently at home."

Even seriously injured or ill patients can make significant progress.

"We might evaluate an unconscious ICU patient one day, and then a week later that patient is up and walking," Sutton says. "When we see patients making progress like that, it reminds us why we do what we do."

Get on the Road to Recovery

Talk to your doctor about the benefits of physical therapy. Need a physician? Visit **FindDrRight.com** or call **1.800.4BAYLOR** for a referral to a doctor on the medical staff at Baylor Garland.

Studying Stress

Baylor researchers look at the effects of working with trauma patients

ANYONE WHO HAS WATCHED a

medical drama on TV can imagine how stressful it is to work with critically injured patients.

Baylor researchers are examining just how much this stress can affect health care providers. What's more, they want to learn what might be done to ease or prevent what's known as secondary traumatic stress.

Secondary traumatic stress is similar to post-traumatic stress disorder, says Ann Marie Warren, PhD, ABPP, a licensed psychologist and an associate investigator of trauma research in the Level I Trauma Center at Baylor University Medical Center at Dallas.

"The empathy that draws people to the health care profession actually makes us susceptible to secondary traumatic stress," she explains.

Clinicians experiencing secondary traumatic stress might find themselves thinking too much about the traumatic stories they hear or having nightmares that the traumas are happening to them. Other symptoms include trouble sleeping and irritability.

As a Level I Trauma Center, Baylor Dallas treats some of the area's most critically injured patients. The study is looking at every discipline that cares for trauma patients, including doctors,

Are You a Clinician?

The study of Secondary Traumatic Stress in Clinicians is limited to Baylor Dallas personnel, but it may be open to other health care providers in the future. Email **AnnMariW@BaylorHealth.edu** or call **214.820.4460** to learn more.

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nurses, surgeons, emergency medical personnel and rehabilitation therapists. Researchers want to better understand not only the incidence of secondary traumatic stress but also the theory that the more resilient medical personnel are, the less likely they might be to develop secondary traumatic stress.

By gathering data on the clinicians' backgrounds, experiences and reactions to patients, the researchers hope to better understand secondary traumatic stress. This knowledge may be able to help them develop management and prevention strategies. Although the study is focused on trauma clinicians, the researchers hope to expand their work to include other medical specialties, as well as family members who are caring for trauma patients.

"Family members aren't usually professional caregivers, so you can imagine that the experience of living through these events is significant," Dr. Warren says. "As for our clinicians, we want to help take care of them and improve their quality of life—which can ultimately translate into better patient care."



Excuse Me?

The real reasons you're not getting your screenings—and how to get past them

WHEN YOUR DOCTOR,

spouse or mother asks, you avert your eyes. You know you should be getting regular health screenings, but you just ... don't. Is it because you don't have time? Think they're too expensive? Worry about discomfort? Here's how to get over it.

EXCUSE: I DON'T HAVE TIME

It's not about having the time, it's about making the time. "Many physicians offer services in an afterhours setting," says Kimberly McMillin, MD, a family medicine physician on the medical staff at Baylor Medical Center at Garland. "And many mammography places offer nights and weekend appointments."

If you feel bogged down in appointment after appointment, plan in advance, schedule all your screenings for one day and take the day off work. Then, reward yourself with a movie, spa service or an afternoon of shopping.

EXCUSE: THEY'RE TOO EXPENSIVE

"In the scheme of things, people spend a lot of money on different things," Dr. McMillin says. "The cost of breast cancer could be \$40,000. I think a \$150 mammogram is a good deal."

And even if you don't have insurance, there are plenty of low-cost and no-cost screenings available through government programs and community health fairs. Talk to your doctor about your options.

EXCUSE: I JUST FORGET

This is an easy one. "Just set a reminder in your smartphone to get screened every year," Dr. McMillin says. Another idea is to schedule all your screenings during your birthday month each year.

EXCUSE: IT'S GOING TO HURT

True, some screenings are uncomfortable. "A mammogram is going to hurt a little, but there are things we do cosmetically that hurt just as much if not worse," Dr. McMillin says. And in the end, it's worth it.

EXCUSE: I DON'T WANT TO KNOW

Some people avoid screenings because they feel healthy. "I call it benign neglect," Dr. McMillin says. "But it's much better to find that high cholesterol at 45 than to wait until you have a massive heart attack."



Schedule Your Screenings Today

Talk to your doctor about the health screenings you need. To find a doctor on the medical staff at Baylor Garland, call **1.800.4BAYLOR** or visit **FindDrRight.com**.

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COMMUNITY CALENDAR July & August 2012

Prepared Childbirth and Basics of Baby Care This class meets on Tuesday for five weeks from July 3 through July 31, 7 to 9:30 p.m. The class helps prepare the expectant mother and her support person for the birth of the baby. Classes should start during the sixth or seventh month of pregnancy. The class fee is \$85/couple. To register, call 1.800.4BAYLOR or register at **BaylorHealth.com**/ Garland.

Infant/Child CPR When: July 28, 10 a.m. to 12:30 p.m. This class is designed for expectant parents, parents of infants and children, and others who work with infants and children. The course includes infant/child health and safety issues and CPR standards set by the American Heart Association. The class fee is \$25. To register, call **1.800.4BAYLOR** or register at **BaylorHealth.** com/Garland.

Sibling Class

When: August 11, 9 to 10 a.m., Where: Baylor Medical Center at Garland, Women's Center, 2300 Marie Curie, in Garland. Help prepare your child for the new baby. Tour the hospital and learn what to expect when the new baby arrives. Children ages 3 through 10 are invited to attend. Sign up for this class during the eighth or ninth month of the mother's pregnancy. Parents should attend with their child. The class includes a big brother or big

sister T-shirt for each child enrolled. The class fee is \$15 for the first child and \$10 for each additional child. To register, call **1.800.4BAYLOR** or register at **BaylorHealth. com/Garland**.

SUPPORT GROUPS Alzheimer's Support

Group Every third Saturday of the month, from 10 to 11 a.m., at the Baylor Senior Center, conference room, 800 N. Shiloh Road, Garland. For more information, call **972.487.5444**.

Breast Cancer Survivor

Group First Tuesday of the month, 7 to 8 p.m. First United Methodist Church, 801 W. Ave. B, Garland. Call **972.272.3471**.

I Can Cope A free educational program for adults facing cancer. Meets the third Tuesday of the month, from 5:30 to 7:30 p.m. at Baylor Garland, Plaza I conference room, second floor, 700 Walter Reed Blvd. Call Sue Johnson at 972.487.5192 to enroll.

SATURDAY MAMMOGRAPHY APPOINTMENTS

Can't find time during your busy week for a lifesaving screening? We've made time for you! Baylor Breast Center at Baylor Garland is offering Saturday mammography appointments, available beginning at 7:30 a.m. Call **972.487.5293** to schedule your mammogram today. It could save your life!



Like many first-time mothers, Angie Zavala had concerns about what pregnancy, labor and delivery would be like. At Baylor Medical Center at Garland, she and her husband, Arthur, attended a childbirth class where they learned more about what to expect. They watched videos with other first-time parents and learned breathing exercises to make labor easier. When it came time to have her baby, Angie returned to Baylor Garland where all her family and friends were allowed to be there to support her. After a short labor, she delivered baby girl Arisbeth. Before going home, a lactation nurse taught her how to breastfeed. "The care I received at Baylor was extraordinary. Everyone was so caring. When it's time to have my next baby, I'll go back to Baylor."

For a physician referral or for more information about women's services, call 1.800.4BAYLOR or visit us online at BaylorHealth.com/GarlandWomen.

2300 Marie Curie Drive Garland, TX 75042



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