Hospitalists in Key Role
Diabetes Prevention
Hyperbaric Oxygen Heals
Spine Surgery Success Story

Have a HEART
New Heart and Vascular Center Opens at Augusta Health
The Heart of It

You may have noticed that we here at Augusta Health have a little spring in our steps these days. That’s because after a year and a half of construction, the new Heart and Vascular Center has opened its doors.

Of course, it likely comes as no surprise. It’s hard to miss a building with 67,500 square feet of new space in addition to 19,000 square feet of renovation; not to mention two cardiac catheterization labs, expanded cardiac rehabilitation space, and nutrition and diabetes counseling and support services. Yes, we are thrilled. To read more about the new center, please see page 10.

But that’s not all we are excited about. The Wound Healing Clinic opened in January. It offers a hyperbaric oxygen (HBO) chamber, which helps to heal chronic wounds, such as burns or diabetic ulcers. We have brought in a chamber so that patients do not have to travel 40 minutes to take advantage of this specialized care.

The new Heart and Vascular Center has 67,500 square feet of new space in addition to 19,000 square feet of renovation.

You will also read in this issue of Health Matters stories about the upcoming Joint Care Center, an innovative joint replacement program that will standardize care and centralize services in one location. A joint care coordinator will navigate patients through the process. Also, we inform you in these pages about a new therapy device here called the BTE Simulator II, the success of the hospitalist program, one man’s spine surgery experience and more.

We hope you enjoy all the changes big and small here at Augusta Health, and don’t hesitate to let us know what you think about them.

Best regards,

Mary N. Mannix, FACHE
President and Chief Executive Officer
Augusta Health

On the cover: Jeff McGlaughlin, an electrician supervisor who worked on the new Heart and Vascular Center, has benefited from the hospital’s cardiac services.
Taking the Lead

Around Augusta

The Doctor Is In

innovations

Machine simulates real-life movements for occupational therapy patients

orthopedics matters

Joint Care Center to serve joint replacement patients

education matters

Prevention is key when it comes to diabetes

wound care matters

Hyperbaric oxygen treats chronic ulcers

back pain matters

Spine surgery helped one patient return to his routine

day in the life

Meet nurse Tammy Patterson

cardiac matters

New Heart and Vascular Center expands treatment capabilities

apple a day

Lose weight in a healthy way
around Augusta
news and tips from your community hospital

pressure’s on

Keep your blood pressure to normal levels

High blood pressure is more than a couple of numbers. It is a serious condition that can lead to coronary heart disease, heart failure, stroke, kidney failure and other health problems.

Blood pressure is the force of blood pushing against the walls of the arteries as the heart pumps blood. If this pressure rises and stays high over time, it can damage the body in many ways.

Knowing your blood pressure numbers is important, even when you’re feeling fine. If your blood pressure is normal, you can work with your healthcare team to keep it that way. If your blood pressure is too high, treatment may help prevent damage to your body’s organs.

What Does It Mean?

Blood pressure is measured as systolic and diastolic pressures. “Systolic” refers to blood pressure when the heart beats while pumping blood. “Diastolic” refers to blood pressure when the heart is at rest between beats.

You most often will see blood pressure numbers written with the systolic number above or before the diastolic number. Normal is considered less than 120/80 mmHg.

If you haven’t done so recently, get your blood pressure checked today. Your heart will thank you.

Stay Physical

You’re never too old to start improving your heart health. Cardiovascular fitness can prevent heart disease and high blood pressure and improve a range of other conditions, including diabetes and Alzheimer’s. And the best part is you can do it starting at any age.

Physicians recommend 30 minutes of moderate activity at least five days a week. If you tire easily or are just starting a routine, three 10-minute periods of exercise a day is beneficial, as well.

One of the best cardiovascular exercises is walking. And if you choose a fun destination or buddy up with a friend, you’re more likely to stick with it.

Swimming is another good heart-healthy activity. Because it’s low-impact, it helps build cardio fitness without the joint stress associated with jogging or weight training. And, as with walking, you can adjust swimming’s intensity level to suit your fitness level.

Before plunging into any fitness routine, however, always check with your doctor.

Augusta Health offers a range of physical fitness classes for people of all ages. Visit augustahealth.com/lifetime-fitness for class schedules.
know your numbers

Regular screenings can stave off heart disease

The key to preventing cardiovascular disease and related health issues is managing your risk factors, such as high blood pressure, high total cholesterol or high blood glucose. The best way to find out your risk factors is through screening tests during regular doctor visits. Here are the key screening tests recommended:

**Blood Pressure**
Blood pressure is one of the most important screenings because high blood pressure has no symptoms so it can’t be detected without being measured. If your blood pressure is below 120/80 mmHg, be sure to get it checked at least once every two years, starting at age 20.

**Fasting Lipoprotein (cholesterol and triglycerides)**
You should have a fasting lipoprotein profile taken every five years, starting at age 20. This is a blood test that measures total cholesterol, LDL (bad) cholesterol, HDL (good) cholesterol and triglycerides.

**Body Weight**
During every healthcare visit, your doctor should weigh you to calculate your body mass index and measure your waist circumference. These measurements tell you if you’re at a healthy weight. Screenings should begin at age 20.

**Blood Glucose**
Starting at age 45, you should have your blood glucose level checked at least every three years. High blood glucose levels put you at greater risk of developing type 2 diabetes, which can lead to heart disease and stroke.

**Smoking, Physical Activity, Diet**
If you smoke, tell your doctor at your next healthcare visit. Also discuss your diet and physical activity habits.

Augusta Health offers lipid panel, cholesterol and glucose screenings. Please sign up in the front lobby or contact Angela Kaltenborn at (540) 332-5527 or at akaltenborn@augustahealth.com for more information.

“I think a lot of people haven’t had compassion for type 2 diabetics and they blame them for the disease.”

Jane Blosser, MS, RD, CDE, clinical coordinator, Outpatient Diabetes and Management Program and Medical Nutrition Therapy department

See story on page 16.
Recipe

**Ingredients:**
Cooking spray
1 pound boneless, skinless chicken breasts, visible fat removed, cut into 1" strips (or chicken tenderloins)
½ cup whole wheat flour
½ teaspoon black pepper
½ cup skim milk
2 tablespoons low-fat (preferably low sodium) Parmesan cheese (grated)
½ cup quick cooking oats
1 teaspoon garlic or onion powder
¼ teaspoon paprika or ½ teaspoon parsley

**Cooking Instructions:**

1. Preheat oven to 375.
2. Spray a baking sheet with cooking spray.
3. On a plate or shallow dish, combine flour and pepper.
4. Pour milk into a second shallow dish.
5. In another shallow dish, combine Parmesan, oats, garlic/onion powder and paprika/parsley (Optional: Pulse oat mixture in food processor for 20 seconds for a finer ‘breading’).
6. One at a time, dip chicken strips into flour and turn to coat. Then dip in milk, and then oat mixture, turning until well coated.
7. Place coated strips on the prepared baking sheet.
8. Once all strips are on the baking sheet, give a light spray with cooking spray.
9. Bake for 20 minutes until golden-brown and cooked through. (Optional: If you prefer darker brown “crispy” tenders, turn on the oven’s broiler for the last two minutes, but keep an eye on the tenders so they don’t burn!)

**TIP:** If you run out of shallow dishes, try using resealable plastic bags or plastic storage containers.

Chicken strips are often high in fat and calories. They don’t have to be. This recipe reduces both with healthful ingredients, such as skinless chicken breasts. They strips are also baked, not deep-fried.
Driving a car, ironing a shirt or tightening a bolt are the kind of tasks most people take for granted, but for many people in physical and occupational therapy, such everyday motions can be challenging or even daunting. That’s why the outpatient center at Augusta Health has added one more way to help patients regain those abilities.

The BTE Simulator II, put in place in October, is a freestanding machine with an array of attachments that simulate a range of movements, from opening a jar to swinging a golf club. Several of the attachments are job-specific, such as emulating the experience of lifting sheetrock or driving a bus. Even seemingly minor tasks, like turning a doorknob, are included to address fine motor skills.

One of the center’s patients, Caleb Harvey, has been slowly recovering from a car accident with the help of the BTE Simulator II. Last June, Harvey was involved in a wreck that crushed his right forearm, and since he worked as a home remodeler and snowboard instructor, the crash took away the range of motion he needed to work.

He uses a device at home that helps to speed healing at the cellular level, but for regaining his mobility, he relies on five to six exercises on the BTE Simulator II that mimic the type of motions he would need to build strength and flexibility for his profession.

Seeing Results
After only a month of using the machine, Harvey could already feel progress. Also, since the simulator’s computer creates reports about his therapy, he can see a graph of how well he’s doing. “I can tell that it’s helping me, I can feel the results,” he says. “Even better, I can look at the reports and get confirmation that what I’m feeling is true. I can see how I’m doing on a daily basis.”

The simulator allows therapists to treat more than one patient at a time, which is better for scheduling and improves overall reimbursement for treatments. Patients can work independently, with little supervision, which can be helpful for making patients feel empowered, says Sandy Wagoner, a therapist at Augusta Health. Many patients already struggle with feelings of limitation, so this sense of control over their treatment is a crucial part of their therapy.

In addition to assisting patients, the simulator also provides objective testing that can be used by therapists and physicians to track progress of the program in general, or of a specific patient. For example, a doctor might determine if a patient is ready to drive a car based on how well he or she does on the simulator’s car attachments, which involve not only a steering wheel but also a brake pedal.

“This is a great tool for us,” says Wagoner. “Patients are really enjoying using it, and it’s helping them to have one more treatment option for their therapy.”

Learn more about rehabilitation at Augusta Health. Call our toll-free number, (800) 932-0262.
Urinary tract infections (UTIs) are a bothersome, many times recurring problem. Though men can get UTIs, they are much more common in women because a woman’s urethra is shorter and therefore bacteria can get to her bladder faster. While certain risk factors increase one’s likelihood of getting a UTI — such as pregnancy, diabetes and low fluid intake — some women get repeated UTIs for unknown reasons. The symptoms of a UTI, if not immediately treated, can be unbearable and include pain during urination, nausea, and feeling as though you constantly have to urinate.

Luckily, there are steps you can take to prevent recurring UTIs. Here are a few key pointers for preventing recurring urinary tract infections:

1. Drink lots of water every day, which ensures you are flushing out your urinary tract. Urinating often allows the bladder to empty in a healthy way.

2. Urinate when you feel like it; don’t “hold it in.” Holding in your urine can allow unwanted bacteria to spread faster and easier than it should.

3. Wipe from front to back after a bowel movement. This eliminates the possibility of any bacteria from your feces entering your urethra.

4. Drink cranberry juice. Two small glasses a day can help prevent UTIs and quicken the recovery of an already diagnosed infection.

5. Women should urinate immediately after having sex. This flushes out any bacteria that may have entered the urethra during sex. Women with very frequent UTIs can also be prescribed an antibiotic to take after sex.

6. Women who have already gone through menopause can go on estrogen to reduce their risk of recurrent UTIs. Talk to your doctor if you think this might be a solution for you.

7. Wear cotton underwear. Cotton is breathable and allows moisture to escape, while other fabrics may trap moisture and keep unwanted bacteria in.

8. Take vitamin C. Vitamin C can increase the acidity in your urine, which helps kill unwanted bacteria that can cause a UTI.

To schedule an appointment, call (540) 332-5687 (Staunton) or (540) 932-5687 (Waynesboro).
I have allergies every spring. How can I keep them under control?

Another key to controlling seasonal allergies is prevention. If you notice on the evening news that pollen will be high in the following days, take your medication that day and keep taking it the following days. The same applies for the allergy season as a whole: instead of starting your medication when the allergy season starts in mid-March, begin taking the medication in late February or early March. Consult with a doctor or pharmacist to see which allergy medication is right for you before taking one. Nasal sprays, inhalants, eye drops and oral medications are all options.

If it feels like your allergies bother you indoors as well as outdoors, there are a few simple steps you can take. Using air conditioning in your home can force allergens outside, while fans and open windows recirculate them into your home. The same applies to driving: use the AC as much as possible. Still feeling congested? Investing in a humidifier, high-efficiency air conditioning filters or a vacuum with a HEPA filter can all help reduce allergens in the air.

If you’ve tried everything but still feel no relief, consider visiting an allergist. He or she can do a skin test to see if your allergies are being caused by something other than typical allergens such as pollen, mold or dust.

Seasonal allergies can be a burden — especially when they interrupt your daily activities. Going to your son’s soccer game is no longer a relaxing afternoon when your head is swollen, you’re constantly blowing your nose and your eyes won’t stop itching. The key to controlling your seasonal allergies is to minimize your exposure. Pollen counts are usually highest when it’s dry and windy and lowest after it rains, so plan accordingly when going outside. If you have to go outside while the pollen count is high, try to change your clothes or shower when you get home to remove the pollen from your body.

Ngoc Le, MD, a family practice physician, is on staff at Augusta Health Family Practice in Verona.

To schedule an appointment, call (540) 245-7425.
New Heart and Vascular Center Opens
The much anticipated Heart and Vascular Center, a major state-of-the-art facility that will have a positive impact on the community’s heart health needs, opened in March.

“We broke ground October 2011 on the Heart and Vascular Center, which consists of 67,500 square feet of new space, in addition to 19,000 square feet of renovation,” says Kathleen Heatwole, vice president of Marketing, Planning and Development for Augusta Health. “Now, it’s a reality. The overall project budget was $32.6 million. The major upgrades include two cardiac catheterization procedure rooms, cardiac rehabilitation space that is triple the previous square footage, and a consolidation of heart services in one location.”

More Opportunities to Deliver

According to Mark Masonheimer, RN, BSN, administrative director, Cardiovascular Services, the new Heart and Vascular Center will allow Augusta Health to expand its capacity for delivering even more top-notch care. “Caring for emergency heart attacks in a timely manner is a benchmark of the quality of a cardiac program,” says Masonheimer. “For example, the national standard for getting emergency heart attack patients from the emergency room door to a lifesaving procedure is 90 minutes, and the national average is 61 minutes. However, Augusta Health’s average time is now 41 minutes. It’s this kind of excellent care that the new Heart and Vascular Center will allow us to continue and expand.”

The Heart and Vascular Center will feature two cardiac catheterization labs. There will also be office space for five cardiologists, two pulmonologists and nutrition services.

Focus on Cardiac Care

While the new center offers better patient flow, convenience and room for expansion, heart care has always been a priority at Augusta Health. Two patients treated for heart trouble before the center opened say they are pleased with the care they received.

“The pain didn’t ease off; it just got worse. So I called my son to take me to the hospital, where the staff took me right on in. They didn’t even let me get my insurance card out.”

According to Masood Ahmed, MD, the cardiologist who treated Murray in the ER, “Mr. Murray was having a specific kind of heart attack called a non-ST elevation myocardial infarction, meaning his heart attack didn’t show the typical abnormality on the EKG.”

continued
Double the Strength

The New Heart and Vascular Center will have not one, but two cardiac catheterization labs. There are several benefits, doctors note.

“One of the advantages of now having two cath labs is that we can do more elective procedures and still have a cath lab available for emergency patients like Mr. Murray,” Masood Ahmed, MD, says. “The elective interventions include treatments for peripheral vascular disease, such as angioplasties for blood vessels in the legs.”

Another advantage is the new Heart and Vascular Center will be able to handle two heart attack patients at once. “When we have multiple heart attacks in the ER — which has happened more than once — we now have two cath labs to handle the patients,” explains Raj Pillai, MD. “This is a huge advantage from my perspective.”

However, we went in with a cardiac catheterization procedure and found an artery that was 100 percent blocked. We opened the artery and inserted a stent to help keep it open.”

The procedure went like clockwork. “Right after surgery, the pain in my arm and chest went away. When I left, I felt like a new man,” says Murray. “I told Dr. Ahmed that I just couldn’t believe that they could do something like that. It was like a miracle.”

Trouble on the Job

It’s appropriate that Jeff McGlaughlin, a 62-year-old electrician supervisor, helped build the electrical systems for the new Heart and Vascular Center. Soon after his work on the center ended, he was in desperate need of the services he had been working to expand.

He was at work (not at the new center) last Sept. 27, when he got light-headed and started sweating profusely, McGlaughlin recalls. “One of my co-workers convinced me to go to the hospital,” he says. “When I got into the emergency room, I explained my symptoms and they took me back. One of the nurses asked about my medications, so I reached for the list in my wallet, and that was the last thing I remember.”

McGlaughlin loss consciousness because his heart stopped beating due to a massive heart attack. “Mr. McGlaughlin was practically dead, with barely any blood flow,” recalls Raj Pillai, MD, the cardiologist who used multiple defibrillator shocks and CPR to bring McGlaughlin back. “He had multiple cardiac arteries that we had to unblock. We really weren’t sure if he would survive. I would say he came as close to death as possible, and still came back.”

After inserting several stents, doctors sent him to the University of Virginia for a possible transplant. He stabilized but required an internal defibrillator a few weeks later.

Miraculously, McGlaughlin is currently back working and enjoying some of his favorite hobbies. “I’ve lost some stamina and a lot of my work is physical, but I am back at work,” he explains. “I also still love to hunt and fish, although my walking is a little limited. I really believe that the Good Lord looked after me. But I do want to say that Dr. Pillai and his team took excellent care of me. I believe we are very lucky to have him here, and we don’t have to worry about making a trip across the mountain for emergencies like these.”

Learn more about heart and vascular services at Augusta Health. Visit augustahealth.com/heart-and-vascular.
The hospitalist practice at Augusta Health was started 11 years ago, and its mission remains the same: to provide the highest quality of care for patients who are admitted to our hospital.

Though hospitalist programs are now part of most health systems, there is still confusion in the public about their structure and relationship to primary care. Here’s how they work: When a patient is admitted to the hospital for a non-surgical problem, a doctor who specializes in hospital medicine (the hospitalist) handles his care, rather than the patient’s primary care physician. There are many reasons why this model is effective, says Dr. Clint Merritt, MD, a hospitalist at Augusta Health.

“Hospitalists staff the hospital 24 hours a day, so they are able to promptly respond to any change in a patient’s condition,” he says. “Because they are in the hospital throughout the day, hospitalists have more time to meet with families and provide education about health conditions. Focusing on hospital illnesses all of the time, these doctors develop expertise in handling complicated cases, and they have proven a higher efficiency in providing hospital care. Finally, hospitalists often lead quality improvement projects, like reducing hospital infections or improving teamwork with nursing.”

**Closing Gaps**

Patients frequently ask about the extent to which hospitalist doctors relate to their primary care doctors, notes Dr. Merritt. “We see this as one of our large challenges,” he says. “Can we bridge the space between the clinic and the hospital, so that care is informed, safe and effective? We work actively to have good coordination with our community physicians.”

He offers the following steps taken by Augusta Health hospitalists to ensure strong coordination among doctors when patients are admitted to the hospital:

1. Sending full admission histories to the primary care physician offices
2. Sending a report of the full hospital course at the time of discharge
3. Requesting medication lists from primary care offices
4. Calling the primary care physicians when there are questions or concerns
5. Surveying the primary care physicians on hospitalists’ communication and quality of care
6. Meeting with primary care doctors to talk about care coordination
7. Having office staff on weekdays and hospitalists always on call to assist with patient transition from the hospital to the clinic

Technology also allows Augusta Health to join care between doctors, clinics and the hospital, but one challenge remains: While most patient care is documented in an electronic medical record, practices affiliated with Augusta Health have different electronic systems. Augusta Health is working to link these systems, so that physicians in one location can read the records of other physicians who provide care for the same patient. “This is a large project, and there is great potential here for improving the communication and the quality of care in the next couple years,” Dr. Merritt explains.
Unlike most patients that come to the hospital, joint replacement patients are generally healthy individuals. However, during the last 10 years, the number of people over 65 who received hip and knee replacements increased over 35 percent and 70 percent, respectively. These facts have prompted healthcare professionals to rethink the way that joint replacement patients are cared for.

At Augusta Health, these changes include the introduction of the upcoming Joint Care Center, a comprehensive program that will be based on national best practice models for hip and knee replacements. This program, which will start in the fall, will be structured around the fundamental principles of wellness. For example, if you need joint replacement surgery, preparation for the procedure will begin at the doctor’s office. The wellness principles also mean that patients will be treated more like students, and rehabilitation will involve wearing street clothes to exercise, not lying in bed in a hospital gown. In other words, this will not be your typical hospital stay.

"Our ultimate goals are better patient outcomes and higher patient satisfaction."

Kemper McCauley, RN
focus on services

patients in one physical location, which will offer several benefits. “For example, the Joint Care Center will have dedicated nursing staff and therapists working exclusively with joint patients,” explains McCauley.

A major asset of the program is the joint care coordinator who will help patients navigate through the system and the entire process. “First, the care coordinator will be involved in patient education prior to surgery through information distributed at doctors’ offices and pre-operative classes,” explains McCauley. “The coordinator will also visit patients after surgery, and follow up with phone calls once patients go home to address any questions or concerns.”

**Experiencing the Difference**

Unlike other typical hospital stays, joint replacement patients will be encouraged to get moving and walking as soon as possible. And as mentioned, joint patients wear street clothes during rehabilitation sessions.

“Another difference is that we will strongly encourage patients’ family members to be involved in the process, including education about exercising and what to expect overall,” says McCauley. “Of course, family members are the ones that will be at home, helping the patient adjust to daily living.

“Our joint program will involve intensive therapy and rehabilitation, but it’s also about creating a destination center and superior performance, where patients consistently experience the best possible outcomes,” adds McCauley. “We want patients to be extremely satisfied with their care from start to finish.”


**Orthopedic specialists at Augusta Health**
(left to right): George Godette, MD, Kenneth Boatright, MD, Thomas Pereles, MD, Greg Hardigree, MD, Lee Hereford, MD, Jack Otteni, MD, and Ramon Esteban, MD

surgeries for many years, improving patient outcomes is a constant goal. One way to achieve better outcomes is by standardizing care and communicating that information throughout the entire process.

“We will be standardizing the care that’s delivered from the time the patient enters the system at the physician’s office, all the way through pre-admission testing, surgery, recovery, discharge and the remaining rehabilitation process,” says Kemper McCauley, RN, director of the skilled care unit and inpatient rehabilitation.

Another piece of this process involves consolidating joint replacement
Keeping diabetes in check

Diabetes, a major health concern today, is a disease in which the body fails to produce insulin (type 1) or is not able to use insulin efficiently (type 2). As of 2011, over 25 million Americans had diabetes. Most of these people are type 2 diabetics. The number of people with this type is set to rise exponentially in the next 10 years, as 79 million Americans over the age of 20 are estimated to have pre-diabetes.

Fortunately, early diagnosis and treatment of pre-diabetes can prevent or delay the onset of type 2 diabetes. Whether you have type 1 or type 2, keeping your blood sugars well controlled can prevent or delay diabetic complications of heart disease and stroke, and reduce the risk of nerve, kidney and eye damage.

According to Jane Blosser, MS, RD, CDE, clinical coordinator of the Outpatient Diabetes and Nutrition Program and Medical Nutrition Therapy department, there are several steps people can take to lower their risk of diabetes, beginning with proper education. And close follow-up with a provider is important to prevent complications, as diabetes is a progressive illness.

**Signs and Symptoms**
One of the main differences between type 1 and type 2 diabetes is type 1 typically presents in childhood, and type 2 usually presents in adults. However, with the rise in childhood obesity, some children are now being diagnosed with type 2. The symptoms are the same for both.

“We call the symptoms the three P’s — polyuria, polydipsia and polyphagia — or urinating a lot, drinking a lot and being hungry all the time,” says Blosser, who emphasizes that people experiencing these symptoms should visit a physician immediately. She also suggests that all adults get regular blood sugar tests after age 45.

Patients whose blood sugar is either too low (under 70) or high (over 200) can experience behavioral changes such as slurred speech, difficulty concentrating, weakness and/or “drunk-like” behavior. Seizures, coma or death can result from very low or very high blood sugars. If you have a low blood sugar episode, immediately eat a fast-acting carb — think four plain crackers, 1/2 cup juice or regular soda, 1 cup milk, four glucose tablets or a mini box of raisins — and visit a hospital if symptoms do not improve within 15–20 minutes.

**Who Is at Risk?**
People who are overweight, don’t exercise regularly, have high blood pressure, high cholesterol, sleep apnea or a family history of diabetes are all at risk for type 2 diabetes. “I think a lot of people haven’t had compassion for type 2 diabetics and they blame them for their disease,” says Blosser. “But I think there are a lot more factors.”

“It sounds small to us, but to a diabetic one less injection a day is huge.”

Jane Blosser, MS, RD, CDE
Blood Sugar Monitoring

It’s important to know your blood sugar levels, or how much sugar (glucose) is in your blood. High blood sugar can signal diabetes. Visit your doctor to find out your levels. Here’s what the numbers mean:

- Fasting levels below 100 mg/dL are healthy.
- Fasting levels between 100 mg/dL and 125 mg/dL are considered pre-diabetes.
- Fasting levels of 126 mg/dL or higher typically result in a diabetes diagnosis.

These factors, suggests Blosser, are things like a rise in foods made with trans fat, a decrease in activity level among Americans and improper education about serving sizes and calorie intake — what Blosser calls “portion distortion.” Eating healthily and regularly exercising can drastically reduce one’s risk of diabetes and prevent the progression of the disease.

New Treatment Options

Though insulin, oral medication, exercise and diet are the primary treatment options for type 2 diabetic patients today, scientists are still coming up with new treatments. Long-lasting insulin is being developed that can be mixed with rapid-acting insulin — something not currently possible. “This would mean one less insulin injection a day for a patient needing four injections a day,” says Blosser. “It sounds small to us, but to a diabetic one less injection a day is huge.” Another medication in final phase testing will allow diabetics to urinate out their excess blood sugar. More information can be found online at augustahealth.com/diabetes-education.
Early every day, Robert Markley settles in and tries to take a nap, but this isn't an ordinary attempt at grabbing some afternoon shut-eye. He's inside a clear-glass hyperbaric oxygen chamber with a nurse just outside, and he occasionally has to "pop" his ears to keep them clear, as if he's deep sea diving.

"Some people think it must feel odd or claustrophobic, but really, it doesn't," he says. "As long as you remember to keep your ears okay, it's just like lying down at home."

The chamber was put in place on Jan. 7 to augment Augusta Health’s wound care capabilities. The treatment creates an environment in which a patient breathes 100 percent oxygen at a pressure greater than sea level. It takes about 20 minutes for a patient to "dive down" to that level, and another 20 to "come back up." Patients breathe 100 percent for about 90 minutes.
Hyperbaric Oxygen Therapy is available in Augusta Health’s Wound Healing Clinic from Monday through Friday. It typically requires a doctor’s referral. To find out more, call the Wound Clinic at (540) 245-7230 (Staunton) or (540) 221-7230 (Waynesboro).

That level of oxygen is beneficial for wound care because in some cases of chronic wounds — such as failing grafts, burns or diabetic ulcers — the body can’t send enough oxygen to the affected area. When tissue doesn’t get a steady oxygen supply, it can hinder healing, leaving a wound open and subject to infection.

**Non-healing wounds**

So far, Markley has been one of three patients at Augusta Health undergoing hyperbaric oxygen sessions for wound issues. In his case, the 79-year-old was affected by radiation that he underwent in 2010 as part of a treatment for prostate cancer. He began bleeding a year later, and his physician tried a number of medications, but all were unsuccessful.

Most likely, he’ll undergo a total of about 40 sessions in the chamber, but could have up to 60 depending on his progress. As of January, with 15 sessions already behind him, Markley noted that he was seeing some slight improvement, and he’s hopeful that the progress will continue.

Hyperbaric oxygen treatments are reserved for patients like Markley, who’ve tried several avenues for chronic wound care already, says Dianne Moody, department director of Augusta Health’s Wound Healing Clinic. “This is for a high-risk population of patients, who are living with chronic wounds and may even be facing amputation,” she says.

The clinic brought in the chamber because patients had been traveling 40 minutes one way, over the mountain, to the nearest treatment center. “When you have to go in five times a week for months, that type of travel is a huge hardship,” Moody notes.

Staff received comprehensive training and certification for using the chamber, and Moody anticipates that many more patients will benefit in the near future. Particularly those who’ve had to undergo radiation, like Markley. Radiation kills cancer cells, but it also affects the healthy tissue around those areas and wounds and bleeding can result later. For some patients, it may even be a decade after radiation that wound problems begin to occur.

Because the clinic already provides an extensive range of wound care options, adding hyperbaric treatment just makes sense, Moody believes. “Hyperbaric oxygen is one more tool in our toolbox here, it’s something we can offer to make sure we have what patients need,” she says. [3]
When Danny Bowers finished carrying firewood in late 2011, his back began to feel tight. He dismissed the problem as one of those annoying little tweaks that come with repetitive motion. Then, it got worse. By the next spring, he was in severe pain, and was taking potent painkillers four times per day.

The constant pain made it difficult for him to stand or sit. As the pain dragged on for months, depression set in. He lost all enjoyment in life. He worried that he would never get better.

“I couldn’t find anyone who could help me,” he recalls. “Then I met someone who suggested that I see Dr. Pollard (at the Augusta Health Spine Clinic), and I thought I’d give it a try.”

Bowers went to the clinic for an MRI in January 2013. It showed a large disc herniation that was pressing on the sciatic nerve. Matthew Pollard, MD, knew immediately there was hope for Bowers. Because non-operative treatments had been unsuccessful, Bowers decided to pursue surgery.

Although Bowers was anxious about the surgery, he felt reassured after Dr. Pollard explained the purpose of the operation. Making the situation even smoother, the staff at the clinic did everything they could to shepherd him through the process, Bowers recalls.

“They don’t treat you like a number,” he says. “They really care about you, and that helps so much when you’re in a situation like that.”

Bowers underwent a procedure called a lumbar micro-discectomy. Through a 1-inch incision, the disc fragment that was cutting into the nerve was removed.

After surgery, Bowers noted immediate and complete relief, and has continued to heal uneventfully. Although he still has some lifting restrictions, he is now able to walk and sit without pain.

“It’s been wonderful,” he says. “Dr. Pollard and Augusta Health gave me my life back.”

Dr. Pollard explained the purpose of the operation. Making the situation even smoother, the staff at the clinic did everything they could to shepherd him through the process, Bowers recalls.

“What’s expected in terms of postoperative recovery?”

“What’s the non-surgical options that can be pursued first?”

“What are the different types of surgery that might be available?”

“What should I do to prepare in the days leading up to surgery?”

“Dr. Pollard and Augusta Health gave me my life back.”

Danny Bowers is relieved to be walking and working without chronic pain.
Simple Math

Embarking on a weight loss plan? Keep these numbers in mind to maximize your results.

1. **2** The number of glasses of water recommended we drink before each meal to curb our appetite.

2. **18.5–24.9** The ideal BMI range for adults.

3. **150** The number of minutes of aerobic activity to strive for each week.

4. **1–2** The number of pounds to aim to lose per week for sustained weight loss.

5. **5** The number of fruits and vegetables we are advised to eat per day.

6. **3,500** The number of burned calories it takes to lose one pound.

[Source: augustahealth.com]
Battle of the Bulge

How to shed unwanted pounds — for good

You’ve tried everything: the Atkins diet. The South Beach diet. Jenny Craig. Going gluten-free. And sure, you may lose a few pounds to begin with. The minute, however, that you stop the diet, the weight piles back on, right?

According to Barbara Fenton, MD, at Augusta Health, the key is not what you eat, but rather how much you eat. “Fad diets don’t work because it’s not about the particular macronutrients that you have in your diet, but the total caloric intake,” says Dr. Fenton. “That’s why the way to lose weight is to eat less and move more.”

Dr. Fenton suggests that though people should consider what they eat — a 300-calorie donut has much less nutritional value than 300 calories of almonds — what really matters is the total caloric intake. “It’s really mathematical,” says Fenton. “It’s how many calories you take in versus how many you expend.”

Move It
One of the key ways to keep weight off once you have lost it is by sticking to a regular exercise plan. Dr. Fenton stresses that regular exercise is critical because when your body starts dropping the weight, the amount of energy that goes to your bodily processes is less because you are eating less. Exercising helps keep those bodily processes moving and ensure that you won’t regain the weight.

But what is the right amount of exercise? It takes a loss of 3,500 calories to lose one pound, so burning 300-500 calories in a workout, coupled with cutting your diet by about 300-500 calories a week will give you that extra push to shed the unwanted weight.

For those who cannot partake in strenuous exercise due to age or a health condition, Dr. Fenton suggests building more walking into you daily routine. “Walking is a great way to exercise and you can do it anywhere,” says Dr. Fenton. “Plus, walking doesn’t require any fancy equipment.” Dr. Fenton advises her patients who are considering a walking routine to invest in a pedometer so they can see how much they regularly walk and increase that accordingly.

A Personalized Plan
Due to our individual differences, Dr. Fenton suggests that patients interested in losing a significant amount of weight consult their doctor first. Several different factors go into one’s ability to lose weight, according to Dr. Fenton. Varying amounts of body fat, certain medications and other variables, such as sleep patterns and chronic diseases, can affect one’s ability to lose weight.

Another reason to set up a plan with your physician is to set a realistic weight loss goal. “A lot of people are unrealistic when they start; that’s one reason they’re unsuccessful in losing weight,” says Dr. Fenton. “They have this idea they’ll lose a huge amount of weight very quickly and that doesn’t happen.” Dr. Fenton suggests that though each person is different, losing 1-2 pounds per week is a sensible goal. •••

Learn about weight loss strategies that work for you with a registered dietitian. Call (540) 332-4576 in Staunton or (540) 932-4576 in Waynesboro.
AUGUSTA HEALTH LIFETIME FITNESS GROUP
CLASSES AND SCREENINGS

Non-members may purchase a 10-class pass for $100. Classes run on an ongoing basis. Other classes not listed here can be found on our website at augustahealth.com/lifetime-fitness. For more information, call Sharon Stiteler of Lifetime Fitness at (540) 332-5571.

Yoga Classes
Basic: Mondays, 5:30 p.m.; Tuesdays, 9 a.m.; Thursdays, 8:45 a.m.; Wednesdays (multilevel), 9:45 a.m.
Intermediate: Thursdays, 8:45 a.m.

Tai Chi
Cancer Recovery: Tuesdays, 6:45 a.m.
Arthritis and Diabetes: Tuesdays, 11:15 a.m.
Beginner: Wednesdays, 11:15 a.m.
Intermediate: Thursdays, 11:15 a.m.
Advanced: Tuesdays, 7:30 p.m.

Chi Kung
Intermediate: Tuesdays, 10:15 a.m.
Advanced: Thursdays, 10:15 a.m.

Les Mills Body Combat
Mondays, 5:30 p.m.; Tuesdays, 4:30 p.m.; alternate Fridays, 9 a.m.; alternate Saturdays, 9 a.m.

Martial Arts
Extra fee, class passes excluded.
Beginner: Mondays, Wednesdays, 7–8 p.m.
Intermediate: Mondays, Wednesdays, 8–9 p.m.
Cost: $55 a month for members, $90 for non-members

Aquatic Classes
Aqua Power: Mondays, Tuesdays, Fridays, 7:45 a.m.; Tuesdays, Fridays, 9 a.m.; Mondays, 4:45 p.m.; Thursdays, 4:45–5:30 p.m.
(Aquatic Pool)
Aqua Express: Wednesdays, 7:45 a.m.
Deep Water Conditioning: Mondays and Thursdays, 9 a.m. (Aquatic Pool)
Aqua Boot Camp: Mondays, 5:45 p.m.; Tuesdays, 7:45 a.m. (Aquatic Pool)

Therapeutic/Rehabilitative Aqua Classes
Aqua Lite: Mondays, Fridays, 9 a.m., 10 a.m.; Tuesdays, Thursdays, 9 a.m., 10 a.m.; Wednesdays, 4:45 p.m.
(Therapy Pool)
Range of Motion (ROM): Mondays, Fridays, 11 a.m. (Therapy Pool)

Zumba Dance
Mondays, 9:15 a.m.; Tuesdays, 3:45 p.m.; Wednesdays, 5:30 a.m.; Thursdays, 12:15 p.m.; Fridays, 5:30 p.m.

TRX Suspension Small Group Training Class
Wednesdays, Fridays, 12:15 p.m.; Wednesdays, 5:30 p.m.
Information: Sharon Stiteler at (540) 332-5571 or email sstiteler@augustahealth.com for more details. More classes may be available.

AUGUSTA HEALTH LIFETIME FITNESS TENNIS PROGRAM SCHEDULE

Adults 1*2*3* Tennis
What: Learn how to play, improve skills and practice. Ages 18 and older.
When: Thursdays, 6–7:30 p.m.
Cost: $76.50

Adult Cardio Tennis
What: This “workout” tennis program is sure to leave you energized. Ages 18 and older.
When: Mondays, 6:15–7:15 p.m.; Wednesdays, 10:15–11:15 a.m.
Cost: $60

Munchkin Tennis
When: Saturdays, 9–9:45 a.m.
Cost: $57.50

Future Stars
When: Saturdays, 9:45–11 a.m.
Cost: $95.62

†Times and fees for tennis classes and programs are subject to change. For more information, call Chad Reed, tennis coordinator/pro, at (540) 332-5280 or email creed@augustahealth.com.
**SUPPORT GROUPS**

**Friends Listening to Friends Group**

**What:** For newly diagnosed cancer patients who have fears, questions or concerns. This group also addresses life after cancer treatments.

**When:** Tuesdays, 11 a.m.–12:15 p.m.

**Where:** Augusta Health Cancer Center Conference Room

**Information:** For more information about any cancer group, call Leigh Anderson at (540) 245-7105.

**Lean on Me — Caregiver Support Group**

**What:** While you’re taking care of your loved one, don’t forget to take care of yourself.

**When:** Mondays, 4–5 p.m.

**Where:** Augusta Health Cancer Center Conference Room

**Shenandoah Valley Stroke Club**

**What:** This support group is for those who have suffered a stroke and their family members, care partners and friends.

**When:** First Friday of every month, noon

**Information:** Call Shelley Payne at (540) 332-4047 or (540) 932-4047.

**Celiac Sprue Support Group**

**What:** Group meetings feature free samples of gluten-free foods, recipes from support group members, visits from food-service providers and a wealth of practical tips.

**When:** Third Tuesday of every other month, 5–7 p.m.

**Where:** Augusta Health Community Care Building, Rooms 1 and 2

**Information:** Call Laura Johnson, RD, at (540) 932-5034.

**Heart to Heart — Support Group**

**What:** If someone you love has died and you’d like the “heart-to-heart” support of others who’ve also lost someone, we invite you to attend our support group. We understand this is a very difficult time in your life. Talking and sharing with others going through a similar experience can provide tremendous support and be extremely helpful in learning how to cope and live with your grief. Support groups are open to the community and provided free of charge.

**When:** New groups begin throughout the year.

**Where:** Augusta Health Community Care Building

**Information:** To find out starting dates and to learn more, contact Debbie Brown, bereavement coordinator, Hospice of the Shenandoah, at (540) 932-4911 or at dbrown@augustahealth.com.

**Ostomy Support Group**

**What:** In this group meeting, you’ll share ideas and improve your quality of life after ostomy surgery.

**When:** Second Monday of every other month, 6–8 p.m.: May 13, July 8, Sept. 9, Nov. 11.

**Where:** Augusta Health Community Care Building, Room 2

**Information:** Call (540) 332-4346 for details.

**Sleep Apnea Support Group — AWAKE (Alert, Well, and Keeping Energetic)**

**What:** Representatives from the Sleep Center and Care Home Medical will answer questions about sleep and common sleep disorders.

**When:** Third Monday on a quarterly basis

**Where:** Augusta Health Community Care Building

**Information:** Call (540) 932-4169.

**Type 1 Diabetes Support Group**

**What:** For those suffering with type 1 diabetes. No charge, open to the public.

**When:** First Thursday of every month, 6:30–7:30 p.m.

**Where:** Augusta Health Community Care Building

**Information:** Call (540) 213-2537 or (540) 941-2537.

**Type 2 Diabetes Support Group**

**What:** Have questions about diabetes and need answers? Learn and share with other people with diabetes. Topics will be centered on learning to manage your diabetes. No charge, open to the public.

**When:** Fourth Monday of most months, 5:30–6:30 p.m.

**Where:** Augusta Health Community Care Building

**Information:** Call (540) 213-2537 or (540) 941-2537.
Lipid Panel Screenings
What: Total cholesterol, HDL, LDL, TC/HDL ratio, triglyceride and glucose levels are tested. Results can be kept on file and sent to your physician. This is a great tool to monitor your health!
When: Thursday, May 16; Tuesday, June 11
Cost: $25 for members, $30 for non-members
Information: Call Angela Kaltenborn, medical fitness coordinator, at (540) 332-5527, or email her at akaltenborn@augustahealth.com.

Gain Independence From Tobacco
What: This six-session smoking and smokeless tobacco cessation program will help you examine why you use tobacco and create an individual quit plan. The instructor uses evidence-based guidelines and is a certified tobacco treatment specialist.
When: Spring classes began Monday, April 8, 6–7:30 p.m.
Information: Call (540) 332-4988 to learn more.

You Can! Live Well, Augusta!
What: If you are living with a chronic illness (such as asthma, arthritis, diabetes, heart disease or hypertension), join our Community Wellness educators for a six-session workshop to help you explore effective ways to manage your condition and take charge of your life. No charge; all community members welcome.
When: Spring session began Tuesday, April 30. Choose either 1–3:30 p.m. or 6–8:30 p.m.
Information: Call (540) 332-4192 or (540) 332-4988 for more.

Live Well, With Diabetes!
What: Diabetes is a very challenging disease. Come join this six-week program, led by Community Wellness nurse educators, to help you better care for yourself or a loved one. Parents, spouses and caregivers can benefit from the class and are also encouraged to attend. Sessions reinforce healthy eating and exercise, but managing stress, fear, frustration, pain, fatigue, depression and other challenges are at the heart of this program. No charge; all community members welcome.
Information: Call (540) 332-4192 or (540) 332-4988 to find out when the classes are held and other details.

Living at the End of Life — Hospice Volunteer Training
Are you interested in becoming a hospice volunteer and making a difference? For more information, contact Lori Showalter, hospice volunteer coordinator, at (540) 932-4904 or at lshowalter@augustahealth.com.

Pre-Diabetes Class
What: This class is for people diagnosed with pre-diabetes. The focus is on how to slow the progression to type 2 diabetes by making healthy lifestyle changes.
Information: Call (540) 213-2537 or (540) 941-2537 for class dates and times.

Living a Fulfilled Life With Heart Failure
What: This two-session program helps participants learn signs and symptom management of heart failure, medication management and much more. It’s for people with, and at risk for heart failure, as well as their caregivers and loved ones.
When: First and third Wednesday of even months. Times rotate each month:
11 a.m.–12:30 p.m. or 6–7:30 p.m.
Upcoming classes: June 5, June 19:
11 a.m.–12:30 p.m., Room #2, ACC building
Information: Call (540) 332-4190 to register for the class and to learn more.

Breathe Easier With COPD
What: This two-session program helps participants learn signs and symptom management of COPD (Chronic Obstructive Pulmonary Disease), which includes emphysema and chronic bronchitis; medication management; and much more. It’s for people with, and at risk for COPD, as well as their caregivers and loved ones.
When: First and third Wednesdays of alternate months. Upcoming classes include:
May 15: 11–12:30 p.m., Room #3/2, ACC building
July 3, July 17: 6–7:30 p.m., Room #2, ACC building
Information: Call (540) 332-4190 to register for the class and to learn more.
new in town
new physicians and health professionals on staff

Susan Becker, NP
Specialty: Adult Primary Care
Graduate Education: James Madison University
Practice: Staunton Medical Associates
42 Lambert St., Staunton, Va.
(540) 886-6259

Bradley Cashion, MD
Specialty: Anesthesia and Pain Management
Medical School: University of Rochester
Residency: Strong Memorial
Fellowship: Vanderbilt University
Practice: Augusta Health Pain Management
70 Medical Center Drive, Fishersville, Va.
(540) 332-5747

Brian P. Conway, MD
Specialty: Ophthalmology
Medical School: Georgetown University
Residency: Johns Hopkins University
Practice: Augusta Eye Associates
676A Berkmar Circle, Charlottesville, Va.
(434) 220-8001

Carlos R. Ibanez, DDS
Specialty: Dentistry
Dental School: University of Panama Dental School
Residency: UNC – Chapel Hill
Practice: Charlottesville Oral Surgery
675 Peter Jefferson Parkway #270, Charlottesville, Va.
(434) 295-0911

Gary Lloyd, PA
Specialty: Emergency Medicine
Undergraduate Education: East Tennessee State University, Wake Forest University
Practice: Middlebrook Family Practice
40 Cherry Grove Rd., Middlebrook, Va.
(540) 887-2627

John Rhodes, PA-C
Specialty: Pain Management
Undergraduate Education: Central Wesley College, Jefferson College of Health Science
Practice: Augusta Health Pain Management
70 Medical Center Circle, Suite 305, Fishersville, Va.
(540) 332-5747 (Staunton)
(540) 932-5747 (Waynesboro)

Vincent Syers, MD
Specialty: Emergency Medicine
Medical School: University of Medicine and Dentistry of New Jersey
Residency: University of Virginia
Practice: Augusta Emergency Physicians
78 Medical Center Dr., Fishersville, Va.
(540) 932-4444
A registered nurse at Augusta Health for almost 18 years, Tammy Patterson has worked in a variety of departments. Today you’ll find her caring for hyperbaric oxygen (HBO) therapy patients in the new Wound Healing Clinic.

“The highlight of my day is taking care of my patients and seeing their wounds really heal,” says Patterson. “A lot of the wound patients here have complicated cases. They have more than just their wound going on and in order to heal them we have to look at the whole picture, not just the wound.”

HBO allows patients to breathe 100 percent oxygen and is used to heal wounds that cannot heal with conventional treatments. (For more on HBO, see story on page 18). The main types of wounds Patterson manages are diabetic foot wounds and soft tissue damage wounds caused by radiation.

Patterson always has had a strong interest in emergency medical services and nursing. She received her nursing degree at Blue Ridge Community College and later a bachelor’s degree at Eastern Mennonite University.

Outside of work, Patterson enjoys activities such as riding ATVs and cruising on her Harley with Mike, her husband of 13 years. She also enjoys playing with her two golden retrievers, Annie and Bailey.

Her favorite hobby, however, is a decidedly indoor one: scrapbooking. “I love to scrapbook,” says Patterson. “People would never picture me as that type of person,” she says. “I am much more of the nature-loving, adventurous type and not the crafty, attention-to-detail type person.”

Born and raised in Highland County, Virginia, Patterson has lived in the Old Dominion her entire life. “I love the small town, tight-knit community culture that we have here,” says Patterson. She also has no plans to leave Augusta Health. “It really is a great place to work,” says Patterson. “The atmosphere is very warm — our patients are our family.”
The American Heart Association and American Stroke Association recognize this hospital for achieving at least 12 consecutive months of 85% or higher adherence to all Get With The Guidelines® Stroke Performance Achievement indicators and at least 12 consecutive months of 75% or higher compliance with 5 of 8 Get With The Guidelines Stroke Quality Measures to improve quality of patient care and outcomes in addition to achieving Time to intravenous Thrombolytic Therapy <60 minutes in 50% or more of applicable acute ischemic stroke patients (minimum of 6) during one calendar quarter.