

» Sam Sydney, M.D., is Chief of Orthopedics at St. Agnes Hospital. UnitedHealth just designated the Center for Bone and Joint Health at St. Agnes as a Center of Excellence.

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AMAZING MEDICINE . AMAZING GRACE .

Hepatobiliary and Pancreatic Cancers

Two specialists in the advanced treatments of hepatobiliary and pancreatic diseases have joined St. Agnes to care for the most difficult and complex cases. Surgical options, including hepatic liver resection, laparoscopic distal pancreatectomy, laparoscopic radiofrequency ablation, and the Whipple procedure may improve the survival rates of patients with these liver and pancreatic cancers.

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Treatment for Blood Disorders

The Center for Blood Disorders at St. Agnes Hospital has an established anticoagulation clinic and recently welcomed a new medical director. The center's expanded services include benign hematology, therapeutic phlebotomy, hematology, and hematologic malignancy.

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Cardiac PACS Now Available

The addition of PACS technology to St. Agnes Hospital's Cardiology department provides convenience for physicians and faster diagnoses for patients. The new system allows images to be viewed immediately by staff members in the Cardiology and Radiology departments and to be viewed simultaneously by consulting physicians via a secure Internet connection.

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Winning the Battle against Drug-Resistant Infections

Dear Colleagues,

Like all health care facilities in Maryland and across the country, St. Agnes is engaged in a constant battle against drug-

resistant infections. As the acuteness of hospitalized patients' conditions increases and our patient population is more susceptible to infection, prevention of hospital-acquired infection is increasingly important.

St. Agnes is taking a number of measures to stem the spread of infection, including enhanced screening of high-risk admissions to identify and isolate infected patients sooner; revised equipment cleaning and waste management procedures; and extensive staff education and training on the causes and prevention of infection.

As we move forward with these changes and our isolation policies become more stringent, our medical staff can expect to see

more of their patients in isolation. This will require an increased use of gowns and gloves and increased awareness of—and adherence to—posted instructions outside patient rooms regarding infection control precautions.

These are all important steps in the battle, but the most important, effective, and basic weapon we have against hospital-acquired infection is appropriate hand hygiene. Hand hygiene is a proven defense against transmission of antimicrobial resistant organisms (e.g. methicillin resistant staphylococcus aureus, VRE, etc.), according to the CDC. The CDC and St. Agnes recommend the following:

- Always wash your hands when they are visibly soiled.
- Always wash your hands or use alcohol gel between patients and between procedures.
- Always wash your hands or use alcohol gel when entering a patient's room and again when leaving a patient's room.

In addition, it is important to remember that use of gloves and hand washing are not mutually exclusive; use of one does not eliminate the need for the other.

For a thorough list and explanation of standard procedures and precautions for preventing the spread of infection and handling the infected patient, visit the CDC Web site at www.cdc.gov. If you have any questions about infection control measures at St. Agnes Hospital, you can contact our infection control department at 410-368-2249.

Our medical staff plays a vital role in keeping patients infection-free. As always, our goal, and the goal of Ascension Health, remains unchanged: Health care that is safe, health care that works, and health care that leaves no one behind.

Adrian E. Long, M.D.

Chief Medical Officer

St. Agnes' *Physician Update* is a quarterly publication serving the medical staff of St. Agnes HealthCare. It is a forum for news and information of interest to our doctors. *Physician Update* is published by the hospital's Planning, Marketing, and Business Development Office. Questions or comments should be directed to Danielle Underferth at 410-368-2143. This publication is available online at www.stagnes.org.

ST. AGNES HEALTHCARE

Bonnie Phipps
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RENOVATION UPDATE: Growing to serve you better



During our expansion and renovation, St. Agnes Hospital has taken steps to ensure that we will have ample

parking for your patients that is easy to locate and convenient to our facilities.

Free valet service. We offer FREE valet service at the following times and locations:

- Main Entrance: 6 a.m. to 6 p.m.
- Cancer Center: 6 a.m. to 5:30 p.m.
- GI/Rehab: 7 a.m. to 5 p.m.
- Emergency: 7 a.m. to 5 p.m.

Self park. For those who choose to park their own car, signs will

guide drivers to visitor parking and physician parking areas throughout the campus. Parking is accessible from both Wilkens and Caton avenues.

FOR THE LATEST INFORMATION ON OUR RENOVATION AND EXPANSION PROJECT, VISIT WWW.STAGNES.ORG. ST. AGNES HAS AN EASY-TO-UNDERSTAND, INFORMATIONAL PIECE FOR PATIENTS AND VISITORS ON NAVIGATING OUR CAMPUS DURING THE RENOVATION. TO REQUEST COPIES OF OUR RENOVATION UPDATE FOR PATIENTS AND VISITORS, CALL 410-368-2143.

St. Agnes Receives Award for Patient Safety

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Agnes Hospital was recognized recently with the 2008 Distinguished Hospital Award

for Patient Safety by HealthGrades®, a national organization that measures health care quality information. This distinction ranks St. Agnes among the top five percent nationally for patient safety outcomes. Out of more than 5,000 hospitals reviewed, only 294 received the award, and St. Agnes is one of only three in Maryland.

The HealthGrades evaluation utilizes methodology developed by the Agency for Healthcare Research and Quality, part of the U.S. Department of Health and Human Services. The organization examines 13 patient safety indicators at American hospitals, including postoperative infections and preventable deaths.

“The Patient Safety Award demonstrates the direct correlation between good quality care and patient safety,” says Adrian E. Long, M.D., Chief Medical Officer at St. Agnes. “We are committed to providing top-quality, patient-centered care, and this award reflects that dedication to excellence.”



Sen. Barbara Mikulski visited St. Agnes in January to announce that the hospital will receive roughly \$718,000 in federal funding for digital mammography.

Sen. Barbara Mikulski visits St. Agnes Hospital to announce funds for mammography equipment

St. Agnes HealthCare has been awarded a \$718,000 federal appropriation to acquire digital mammography. Sen. Mikulski (D-Md.) announced the award Jan. 15 at a press conference and ceremony held at the hospital. The funds are part of the fiscal 2008 omnibus spending package that was signed into law last November.

The appropriation will be used to purchase mammography equipment for the early detection and reduction of breast cancer. With digital mammography, images are acquired digitally and displayed immediately on a system monitor. The technology provides faster and more accurate biopsies, shorter examination times, and significantly improved patient comfort and convenience.

The funds are part of Sen. Mikulski’s ongoing efforts to champion women’s health nationwide and are a supplement to the St. Agnes Foundation’s \$25 million capital campaign, which is raising funds for the hospital’s renovation and expansion project.

News and Notes

Members of the St. Agnes medical staff are invited to share their honors, awards, and milestones in this space. Call 410-368-2143, or e-mail dunderfe@stagners.org to submit an item.



Mohammed Pathan, M.D., recently was board-certified in sleep medicine by the American Board of Psychiatry and Neurology, a member-board of the American Board of Medical Specialties. Dr. Pathan also is board-certified in neurology, vascular neurology, and neurophysiology. “We congratulate Dr. Pathan on this group of rare achievements,” says Marian P. Lamonte, M.D., M.S.N., Chief of Neurology at St. Agnes. Dr. Pathan can be reached at 410-368-8444.

Expanded Options

for Hepatobiliary and Pancreatic Disease



Two of the region's leading general surgeons have joined St. Agnes Hospital to treat patients with complex hepatobiliary and pancreatic disease. With the addition of Mark Fraiman, M.D., and Richard Mackey, M.D., St. Agnes provides a full spectrum of services for these patients.

"Our goal is to grow this service line at St. Agnes, and the hospital has been willing to acquire the advanced technology we need to provide complete care to these patients," says Dr. Fraiman. "Classically, this level of care has only been available in the university setting, but it was St. Agnes' goal to provide this type of cutting-edge treatment in the community hospital setting as well."

Pancreatic and hepatobiliary cancers traditionally have some of the lowest five-year survival rates, but that statistic may be improved with surgical intervention performed by physicians with extensive operative experience.

"The vast majority of the procedures we're performing are to remove malignant lesions—particularly tumors in the bile ducts, small intestines, or pancreas," says Dr. Mackey. "Success with chemotherapy and radiation is somewhat limited for these types of malignancies, with surgery being the patient's only chance for a cure."

Minimally Invasive Procedures

Because liver and pancreatic cancers are usually diagnosed in the advanced stages, they are

especially difficult to treat and have high mortality rates. Advanced procedures can be a physician's best option, and several are now performed using minimally invasive techniques with significantly improved survival rates.

Laparoscopic procedures available at St. Agnes include:

- **Hepatic liver resection.** While not every patient is a candidate for laparoscopic liver resection, it's a viable option for partial hepatectomies and segmental resections and provides comparable—if not better—results than open surgery.
- **Laparoscopic distal pancreatectomy.** While patients with known adenocarcinoma should opt for traditional, open tumor resection, patients with benign pancreas lesions might be candidates for distal pancreatectomy. During this procedure, surgeons can remove the left half of the pancreas with or without performing a splenectomy.
- **Laparoscopic radiofrequency ablation.** Under ultrasound guidance, a special heat-emitting probe is guided into the primary liver cancer tumor. The heat then ablates the tumor while reducing the risk to healthy tissue. RFA can be used alone or in conjunction with other treatments for liver cancer.

DR. FRAIMAN AND DR. MACKEY CAN BE REACHED AT 410-427-2024. THEY SCHEDULE SURGERIES TWICE MONTHLY AT ST. AGNES HOSPITAL.

"St. Agnes Hospital has a group of very talented surgeons who have provided a very high quality of surgery to patients with benign and malignant tumors of the pancreas and liver. However, we were delighted to take these services to the next level by adding the skills of two high-volume liver and pancreatic surgeons—Mark Fraiman, M.D., and Richard Mackey, M.D.—to our staff."

—David Levien, M.D., F.A.C.S., Chair of the Department of Surgery at St. Agnes Hospital

The Whipple Procedure

One of the most common surgical options for pancreatic disease is pancreaticoduodenectomy, also known as the Whipple procedure. The complex surgery is indicated for ampullary tumors, chronic pancreatitis, cystic neoplasm of the pancreas, and rare pancreatic tumors. During the procedure, surgeons remove the head of the pancreas, the duodenum, and the distal bile duct. The pancreas and bile duct are then sewn to the small intestine.

Expanded Blood Disorder Services

THE CENTER FOR BLOOD DISORDERS AT ST. AGNES HOSPITAL PROVIDES MULTIDISCIPLINARY CARE FOR PATIENTS WITH A WIDE RANGE OF HEMATOLOGICAL DISORDERS AND CANCER

The Center for Blood Disorders has an established anticoagulation clinic and specialists in therapeutic phlebotomy, hematology, and hematologic malignancy. With the arrival of Meyer R. Heyman, M.D., hematologist and medical oncologist at St. Agnes Hospital, the center has expanded its services to include benign hematology.

“As a leader in the management of benign and malignant blood disorders, Dr. Heyman’s extensive experience will complement our already strong program,” says Carole B. Miller, M.D., Director of the Cancer Center at St. Agnes Hospital. “With 1,000 patients in our care at the anticoagulation clinic and clinical trials for leukemia, lymphoma, and clotting disorders under way, we are expanding our clinical and research infrastructure during the coming months.”

Treating Thrombophilia

The Center for Blood Disorders provides perioperative management of anticoagulation and long-term anticoagulation as well as consultation for patients with thrombophilia. Women with thrombophilia often have healthy pregnancies, but the condition can contribute to fetal loss and placental abruption.

Six weeks of post-pregnancy treatment—when the risk for blood clots is the greatest—may be recommended for women with a thrombophilia or a strong family history of blood clots. Heparin may be recommended throughout pregnancy and the postpartum

period for women with more severe thrombophilias, such as antithrombin deficiency.

Heparin-induced thrombocytopenia (HIT) has become an increasingly recognized problem in patients using the anticoagulant for five or more days. Physicians from the Center for Blood Disorders are available for consultation for patients with suspected HIT.

Patients with HIT may experience complications, including:

- deep vein thrombosis
- pulmonary embolism
- myocardial infarction
- occlusion of limb and intraabdominal arteries, such as the superior mesenteric artery
- cerebrovascular accidents, such as stroke or TIA
- skin reactions, including necrosis
- organ damage to adrenal, bowel or spleen, gallbladder infarction, or renal failure
- global amnesia

“Specialists are available to assist you in the diagnosis and care of thrombophilia and management through the perioperative or peripartum period,” says Dr. Heyman. “They also are available to assist in the management and treatment of all patients receiving anticoagulants. Outpatient consultation is available, as well. I also look forward to treating patients with inherited factor deficiencies, such as hemophilia, which largely affects males and those with von Willebrand disease.”

FOR MORE INFORMATION ABOUT THE CENTER FOR BLOOD DISORDERS AT ST. AGNES HOSPITAL OR TO MAKE A REFERRAL, CALL 410-368-2918.

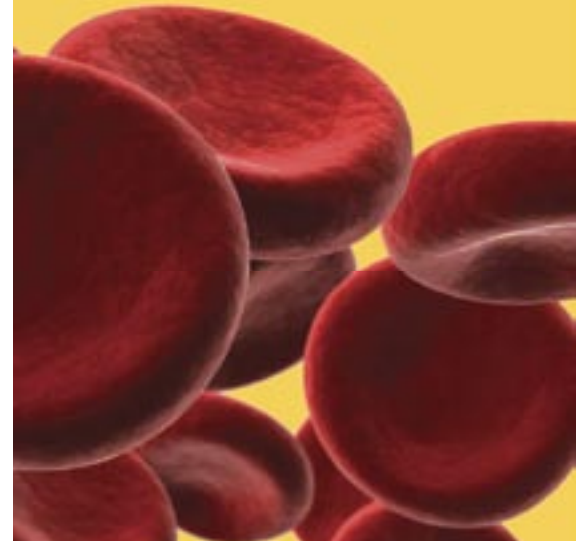
Center Welcomes New Leadership

Meyer R. Heyman, M.D., joined the Center for Blood Disorders in March as Medical Director. Board-certified in hematology, medical oncology, and internal medicine, Dr. Heyman has special interests in myeloproliferative disorders, lymphoproliferative disorders, and benign hematologic problems, such as coagulation disorders.

Dr. Heyman earned his medical degree from the University of Maryland in Baltimore and completed his residency at the University of Maryland Medical Center in Baltimore. He completed fellowships in hematology from the University of Maryland and hematology/oncology from Wilford Hall United States Air Force Medical Center in San Antonio, Texas.

“I am very excited to have joined a group of people who are so well respected and have so much expertise in hematology and medical oncology,” Dr. Heyman says. “As a part of St. Agnes Hospital, I look forward to providing excellence in the care of patients with various hematological disorders. I am also excited about the opportunity to teach in St. Agnes’ nationally recognized internal medicine residency program.”

To refer patients to Dr. Heyman, call the referral intake coordinator at 410-368-2918.



Joint Replacement and Rehabilitation



ORTHOPEDICS

Albert J. Folgueras, Jr., M.D., an orthopedic surgeon with the St. Agnes Center for Bone and Joint Health, performs knee replacement surgery using the gender knee implant. Gender-specific knee replacement is part of a comprehensive orthopedic program at St. Agnes.

JOINT REPLACEMENT REQUIRES BOTH PREOPERATIVE EDUCATION AND POSTOPERATIVE REHABILITATION. THE CENTER FOR BONE AND JOINT HEALTH AT ST. AGNES IS ABLE TO CARE FOR PATIENTS FROM EVALUATION TO RECOVERY



The Center for Bone and Joint Health at St. Agnes includes specialists in joint replacement and rehabilitation and is a program designed to guide patients through the process of joint replacement once all nonsurgical options have been tried.

“Committed orthopedic nurses and therapists are available at all times of the day to take care of your patients while at the Center,” says Sam Sydney, M.D., F.A.C.S., Chief of Orthopedics at St. Agnes. “There also are treatment plans that help accelerate the patient’s rehabilitation and provide uniformity of care.”

Comprehensive Approach

Before surgery, patients are evaluated by a care coordinator to review their medical history and complete necessary testing. Patients then meet with the joint care team for preoperative education and to establish expectations.

“Comprehensive treatment plans are available to all patients,” says Michael Ellis, M.D., orthopedic surgeon on the medical staff at St. Agnes. “Plans are based on each patient’s individual needs.”

After surgery, patients are monitored during their recovery and then guided through the first phase of rehab in the state-of-the-art, 4,800-square-foot rehabilitation center, Independence Square.

“By placing your patients in this type of setting during rehabilitation, we are helping them improve their function and mobility in real-life situations, instead of using the normal mat and ball,” says John Antoniadis, M.D., orthopedic surgeon at St. Agnes. “By assisting them in seeing what life is going to be like once they leave, we help patients gain confidence and a feeling of self-esteem before they leave Independence Square. We welcome all physicians to come and see for themselves how much it helps improve their patients’ quality of life.”

Advances in Technology

Physicians at the Center for Bone and Joint Health remain on the cutting edge of technological advances—such as new prosthetic materials, evolving minimally invasive changes, and methods of rapid patient recovery.

“We are doing more now with different bearing surfaces for all our hip replacements,” says Dr. Sydney. “Metal-on-plastic is still used a lot, however, we are using alternative bearing services to match patient demand, such as metal-on-metal and even ceramic-on-ceramic in some of our younger patients.”

More emphasis is being placed on implants sized to closely meet patient demands. Surgeons are now able to use much larger head sizes as needed to achieve greater range of motion, stability, and function. Previously, the head would be 28 to 30 millimeters in diameter, but the latest metal-on-metal implants can go up to 50 millimeters. Because it is a closer ratio to the *actual* size of the hip, it allows patients greater stability and faster recovery, which also makes it possible to do more activities earlier without the usual risk of hip dislocation.

TO LEARN MORE ABOUT THE ORTHOPEDIC SERVICES OFFERED THROUGH THE CENTER FOR BONE AND JOINT HEALTH AT ST. AGNES, VISIT WWW.STAGNES.ORG.

St. Agnes Hospital Affiliated Orthopedic Surgeons



John T. Antoniadis, M.D.
3449 Wilkens Ave.
Suite 107
Baltimore, MD 21229
410-368-9992

Spiro B. Antoniadis, M.D.
3449 Wilkens Ave.
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Baltimore, MD 21229
410-368-9992

Paul M. Apostolo, M.D.
3449 Wilkens Ave.
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Baltimore, MD 21229
410-368-4851

Oren G. Blam, M.D.
3421 Benson Ave.
Suite 100
Baltimore, MD 21227
410-644-1880

George H. Brouillet, Jr., M.D.
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Baltimore, MD 21227
410-644-1880

Michael A. Ellis, M.D.
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Baltimore, MD 21229
410-368-2870

Albert J. Folgueras, Jr., M.D.
413 Commonwealth Ave.
Catonsville, MD 21228
410-788-4250

Nicholas P. Grosso, M.D.
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410-644-1880

Richard Kinnard, M.D.
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Suite 100
Baltimore, MD 21227
410-644-1880

M. Brian Polsky, M.D.
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Baltimore, MD 21227
410-644-1880

Lawrence Shin, M.D.
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Baltimore, MD 21229
410-368-8323

Scott Silverstein, M.D.
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Baltimore, MD 21227
410-644-1880

Sam V. Sydney, M.D.
3421 Benson Ave.
Suite 100
Baltimore, MD 21227
410-644-1880



Total Joint Center of Excellence

Clinical expertise and the breadth of care are two criteria for the Center of Excellence designation by UnitedHealth Premium® Specialty Center program—which the Center for Bone and Joint Health at St. Agnes Hospital recently received

Total joint specialty centers are evaluated using evidence-based criteria and nationally recognized standards, such as those developed by the Centers for Medicare and Medicaid services.

The Center for Bone and Joint Health at St. Agnes exceeded the following requirements to earn the designation:

- ✓ **emergency services**—A full range of emergency services, through an emergency room, intensive care unit, or rapid response team are available.
- ✓ **experience of orthopedic physicians**—Orthopedic surgeons serve a minimum number of patients each year and have dedicated operating rooms and medical staff. Also, a dedicated patient care unit for postoperative care is provided.
- ✓ **extensiveness of care**—Complete total joint replacement care must be provided for patients, as well as preoperative and postoperative education. Physical and occupational therapy should also be available on-site.

“UnitedHealthcare assessed our entire orthopedics team, procedures, and services and acknowledged our capability to provide excellence and expertise,” says Sam Sydney, M.D., F.A.C.S., Chief of Orthopedics at St. Agnes. “This recognition upholds our ability to help assist your patients in making informed decisions about their joint replacement needs.”

To refer a patient to an orthopedic specialist at St. Agnes, call 866-690-9355.

Lung Cancer Screening Program Hits Milestone

St. Agnes Hospital rang in the new year with an important milestone: In January, the hospital enrolled its 1,000th patient into the International Early Lung Cancer Action Project (I-ELCAP).

St. Agnes is the only hospital in central Maryland participating in I-ELCAP. For a \$75 fee, qualified patients undergo a 20-second CT scan, which can detect 80 percent of lung cancers at stage I development. The entire process takes about 10 minutes.

If the scan reveals abnormal findings, the patient is seen by a

pulmonologist. Individuals are eligible for I-ELCAP if they are 50 years old or older and if they currently smoke or have a history of smoking.

“Early diagnosis offers the best chance to beat lung cancer, but this devastating disease is hard to detect,” says Enser Cole, M.D., Chief of Medical Oncology at St. Agnes. “Once detected, early-stage lung cancers are 80 to 90 percent curable.”

Since the first person enrolled in 2004, four patients have been diagnosed with early-stage lung cancer. These patients underwent surgery to remove

the cancer and required no chemotherapy or radiation.

The I-ELCAP study is being conducted in nine countries, as well as institutions located in 14 states in the United States.

FOR MORE INFORMATION ABOUT I-ELCAP, ITS HISTORY, MISSION, PROTOCOL, AND A BROAD RANGE OF PUBLICATIONS, VISIT WWW.IELCAP.ORG. PATIENTS WISHING TO MAKE AN APPOINTMENT AT ST. AGNES SHOULD CALL 866-690-9355, OR VISIT THE CLASSES AND EVENTS SECTION OF THE ST. AGNES HOSPITAL WEB SITE AT WWW.STAGNES.ORG.



Jacquelyn Pelham, M.D.

Jacquelyn Pelham, M.D., joins St. Agnes Hospital as Director of Perinatology in the Women’s Health Center. Dr. Pelham focuses her practice

on the management of high-risk pregnancies and their complications.

Dr. Pelham most recently was a perinatologist at Washington Hospital Center. She earned her medical degree from Eastern Virginia Medical School in Norfolk, her OB/GYN internship at Mount Sinai Queens Hospital Center in Jamaica, NY, and her residency at the University of Medicine and Dentistry in Newark, NJ. She also completed subspecialty training in maternal-fetal medicine at Thomas Jefferson University in Philadelphia.

Dr. Pelham can be reached at 410-368-2523.



Mercy Jackson, M.D.

Mercy Jackson, M.D., has joined Seton Medical Group and the practice of Geetanjali Wadhavkar, M.D., specializing in internal medicine. She most recently served patients at her Catonsville location.

Dr. Jackson earned her medical degree at Stanley Medical College in India and completed her residency in internal medicine at St. Agnes Hospital. She became board-certified in internal medicine in 2005.

The practice of Drs. Jackson and Wadhavkar is located at 8325 Guilford Road, Suite E, Columbia. For an appointment, call 410-564-0000.



Jeffrey A. Metts, M.D.

Jeffrey A. Metts, M.D., joins Seton Medical Group as an internist.

Dr. Metts earned his medical degree from the University of Florida College of Medicine, and he completed his residency in internal medicine at Drexel University College of Medicine.

Dr. Metts most recently practiced at Sacred Heart Health System in Florida. His practice is located at 700 Geipe Road, Suite 200, Catonsville. Dr. Metts can be reached at 410-368-8750.

Maryland's Leader in Bariatric Surgical Procedures

POWERFUL TOOLS FOR WEIGHT LOSS



Agnes Hospital is recognized by the American Society for Bariatric and Metabolic Surgery as a Center of Excellence. Of all the bariatric surgeries in Maryland, 25 percent are performed at St. Agnes, more than at any other hospital in the state. To date, St. Agnes surgeons have performed more than 2,000 bariatric procedures. The program

includes comprehensive pre- and postsurgical care, including support groups and a dedicated care coordinator. St. Agnes offers both Roux-en-Y, the gold standard in weight-loss surgery, and LAP-BAND, the only adjustable, reversible weight loss procedure.

Patients who are considered morbidly obese have a significantly higher chance of the following (compared to people who are not overweight):

- **Premature death**—morbidly obese people have a 300 to 500 percent greater chance of dying before the age of 76.
- **Medical problems**, including diabetes, high blood pressure, and heart disease
- **Cancer**—certain types, such as colon, breast, and uterine
- **Premature degenerative arthritis and joint pain**, causing limited mobility and activity
- **Sleep apnea and pulmonary hypertension**, which leads to heart failure

FOR MORE INFORMATION ABOUT BARIATRIC SURGERY AT ST. AGNES HOSPITAL, VISIT WWW.STAGNES.ORG.

New Physicians at St. Agnes

The following physicians are new to our medical staff. For the most up-to-date information on the St. Agnes Hospital medical staff, visit the physician finder service online at www.stagnes.org.

Robert P. Akbari, M.D.

Colon/Rectal Surgery
25 Crossroads Drive
Suite 312
Owings Mills
410-363-6664

Hasan A. Awan, M.D.

Internal Medicine
2717 Hammonds Ferry Road
Arbutus
410-242-5350

Adam J. Frank, M.D.

Diagnostic Imaging
St. Agnes Hospital
410-368-3456

Hirut A. Gebrewold, M.D.

Internal Medicine/Hospitalist
St. Agnes Hospital
410-368-2524

Elan C. Halperin, M.D.

Diagnostic Imaging
St. Agnes Hospital
410-368-3456

Marlon R. Maragh, M.D.

Diagnostic Imaging
St. Agnes Hospital
410-368-3456

Magdalena K. Tarnowka, M.D.

Internal Medicine/Hospitalist
St. Agnes Hospital
410-368-2524

Bariatric Physicians at St. Agnes Hospital



Andrew M. Averbach, M.D., F.A.C.S.
Director of Bariatric and Minimally Invasive Surgery
700 Geipe Road
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Catonsville, MD 21228
410-368-8725



Kuldeep Singh, M.D., F.A.C.S.
Midtown Medical Office Building
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Maple Lawn, MD 20759
866-262-9622



David von Rueden, M.D., F.A.C.S.
3421 Benson Avenue
Suite 210
Baltimore, MD 21227
410-368-3003



Welcome, Dr. von Rueden

David von Rueden, M.D., F.A.C.S., has joined St. Agnes Hospital's Bariatric Center of Excellence.

Dr. von Rueden received his undergraduate degree from Georgetown University and his medical degree from the University of Wisconsin. He completed his surgical residency at the Medical College of Virginia in Richmond and Lankenau Hospital in Philadelphia, followed by a surgical oncology fellowship at the Brigham and Women's Hospital in Boston.

Beginning his surgical career at Lankenau Hospital, Dr. von Rueden became Assistant Program Director for the Surgical Residency Program while also holding an academic appointment at Jefferson Medical College as Liaison for Medical Student Education. He was instrumental in developing a laparoscopic surgical program at Lankenau.

Dr. von Rueden is an advanced laparoscopic surgeon with special interest in bariatrics and expertise in robotic surgery. He developed bariatric programs in both Philadelphia and Baltimore.

Cardiac PACS Available at St. Agnes Hospital

Archiving patient catheterization and cardiac echo images recently became more simple with the addition of picture archiving communication system (PACS) technology at St. Agnes Hospital's Cardiology department. Because of the success of PACS in other departments, physicians now have access to the technology in cardiac services.

With cardiac PACS, all cardiac films are uploaded and can be viewed via a secure Internet connection at any location by a consulting physician with appropriate access codes.

"Before PACS, if a pediatric patient had a consultation at Johns Hopkins for a cardiac issue, it took six to eight hours for us to send the readings over from St. Agnes by courier," says Mary Lappe, R.N., Director of Cardiology and Nuclear Medicine at St. Agnes. "There was nothing STAT



St. Agnes has added PACS capabilities to its cardiac diagnostic services. Above: Raymond Plack, M.D., explains images to a small group of clinicians and staff. The hospital has a dedicated suite for viewing images so the technology can be used for teaching.

about it. Now we send the images to their server, and the physician can view them immediately, expediting patient care."

In addition, St. Agnes has implemented a procedure for

most reports to be written immediately and filed with the image along with medical records. This allows ordering physicians to review cardiac images and analysis simultaneously.

Dedicated Women's Unit

St. Agnes Hospital recently opened a surgical unit exclusively for women's procedures, which is designed to help patients transition into postoperative care. The surgical unit is available for gynecological surgeries and women's cosmetic procedures.

"We decided to move ahead with a women's unit after hearing from our physicians that it would improve patient care," says Yolanda Copeland, R.N., Senior Vice President

of Patient Care Services and C.N.O. at St. Agnes. "Previously, we didn't have one centralized location for these patients. With the new unit, physicians are now able to work with a specific and exclusive group of care providers and ensure that the postoperative care provided is specifically what they want for their patients."

The dedicated women's unit provides a warm environment designed to promote faster healing and recovery.

"With the advent of minimally invasive surgeries, women are seeking more comfort at every level," says Reese Tabb, Manager of the Minimally Invasive Surgery Department at St. Agnes. "This unit allows us to provide an environment that gives women a level of intimacy in their care. That sense of calmness and security helps women return to their normal daily lives sooner."

For more information about the dedicated women's surgical unit at St. Agnes, call 410-368-2507.

Continuing Medical Education Form

CME: Read assigned articles on pages 4 and 5 and then complete this form.

1. Hepatic and pancreatic cancers are difficult to treat because:

- a. they metastasize more quickly than other cancers
- b. they are unresponsive to chemotherapy and radiation
- c. they have extremely low five-year survival rates
- d. all of the above

2. Which of the following are minimally invasive options for liver cancer?

- a. hepatic resection and laparoscopic radiofrequency ablation
- b. the Whipple procedure and distal pancreatectomy
- c. transplantation and radiation therapy
- d. all of the above

3. Which of the following are treatment options for pancreatic cancer?

- a. hepatic resection and laparoscopic radiofrequency ablation
- b. the Whipple procedure and distal pancreatectomy
- c. transplantation and radiation therapy
- d. all of the above

4. Laparoscopic hepatic resection is appropriate for which of the following?

- a. patients with colon cancer that has spread to the liver and patients with primary hepatocellular carcinoma
- b. cancers that have not responded to chemotherapy and radiation
- c. cystic neoplasms and some solid lesions
- d. none of the above

5. Thrombophilia during pregnancy can contribute to which of the following?

- a. stroke and fetal loss
- b. fetal loss and placental abruption
- c. hypertension and placental abruption
- d. premature labor and stroke

6. With Thrombophilia, the risk for blood clots is greatest

- a. immediately after pregnancy
- b. two weeks post pregnancy
- c. six weeks post pregnancy
- d. eight weeks post pregnancy

7. Treatment for antithrombin deficiency may include which of the following?

- a. observation throughout pregnancy and Heparin postpartum
- b. long-term anticoagulation care
- c. induced labor and Heparin postpartum
- d. Heparin throughout pregnancy and postpartum

8. One potential complication of Heparin treatment is

- a. reduced oxygen levels
- b. circulation deficiency
- c. decreased efficacy due to increased tolerance
- d. Heparin-induced thrombocytopenia

9. Complications of Heparin have been recognized in patients after how many days of treatment?

- a. five or more days
- b. two weeks
- c. three or more weeks
- d. six weeks

10. Complications of Heparin-induced thrombocytopenia include which of the following?

- a. deep vein thrombosis, pulmonary embolism, and global amnesia
- b. occlusion of limb and intraabdominal arteries, and cerebral accidents
- c. necrosis, myocardial infarction, and pulmonary embolism
- d. all of the above

SELF-ASSESSMENT QUESTIONS

ACTIVITY EVALUATION

Answers for this section are:

- a. knew/know very well
- b. knew/know nothing

1. What was your level of understanding of this topic prior to reading the articles?

2. What is your level of understanding now?

Answers for this section are:

- a. strongly agree
- b. agree
- c. neutral
- d. disagree
- e. strongly disagree

3. The material presented was up-to-date?

4. The material presented was appropriate in its level of difficulty?

5. The educational objectives were achieved?

6. The material will be useful in your practice?

7. The material will improve your clinical skills?

REGISTRATION/ANSWER FORM

To receive one half-hour of AMA cat 1, AAFP prescribed, or AOA CME credit, read the indicated articles and mark your responses on this form. You must complete all questions to receive credit. Then return this form in the envelope enclosed in this publication. A certificate awarding you CME credit will be sent to you by mail. This CME evaluation form must be postmarked by **June 15, 2008**. Forms postmarked later than this date cannot be processed. Please allow up to four weeks after this date for your certification to arrive.

Please print.

First Name MI Last Name

Street Address

City State ZIP code

Area Code Telephone Number

E-mail address

Medical Specialty

Are you a member of the St. Agnes medical staff?

yes no

Statement of Completion: I attest to having completed the CME activity.

Signature _____ Date _____

Marking Instructions Correct: ● Incorrect: ☒ ☓ ☉ ☪

TEST

- | | A | B | C | D | E |
|-----|---|---|---|---|---|
| 1. | ○ | ○ | ○ | ○ | ○ |
| 2. | ○ | ○ | ○ | ○ | ○ |
| 3. | ○ | ○ | ○ | ○ | ○ |
| 4. | ○ | ○ | ○ | ○ | ○ |
| 5. | ○ | ○ | ○ | ○ | ○ |
| 6. | ○ | ○ | ○ | ○ | ○ |
| 7. | ○ | ○ | ○ | ○ | ○ |
| 8. | ○ | ○ | ○ | ○ | ○ |
| 9. | ○ | ○ | ○ | ○ | ○ |
| 10. | ○ | ○ | ○ | ○ | ○ |

Activity Evaluation

- | | A | B | C | D | E |
|----|---|---|---|---|---|
| 1. | ○ | ○ | ○ | ○ | ○ |
| 2. | ○ | ○ | ○ | ○ | ○ |
| 3. | ○ | ○ | ○ | ○ | ○ |
| 4. | ○ | ○ | ○ | ○ | ○ |
| 5. | ○ | ○ | ○ | ○ | ○ |
| 6. | ○ | ○ | ○ | ○ | ○ |
| 7. | ○ | ○ | ○ | ○ | ○ |

Comments/suggestions for topics: _____

Questions? Call 410-368-2143.

This activity has been planned and implemented in accordance with the Essential Areas and Policies of the Accreditation Council for Continuing Medical Education (ACCME). St. Agnes HealthCare, Inc. is accredited by MedChi, the Maryland State Medical Society to sponsor continuing medical educational for physicians.

St. Agnes HealthCare, Inc. designates this educational activity for a maximum of .5 AMA PRA Category 1 Credit(s)™. Physicians should only claim credit commensurate with the extent of their participation in the activity.

CALENDAR OF EVENTS

GENERAL MEDICAL STAFF MEETINGS

Sept. 18, Nov. 20 | Noon to 2 p.m.
Alagia Auditorium
Lunch Served

MEDICINE Grand Rounds

Every Thursday | 8 a.m.
Alagia Auditorium

OB/GYN Business Meetings

First Wednesday | Noon
Alagia Auditorium

Grand Rounds

Every Wednesday | Noon
Alagia

Morbidity & Mortality

Second Wednesday | 7:30 a.m.
Alagia Auditorium

PEDIATRICS Grand Rounds

Every Friday | 8:30 a.m.
Pediatric Conference Room (5AB)

SURGERY Business Meeting

First Friday | 7 a.m.
Alagia Auditorium

Grand Rounds

Every Friday except the first | 7 a.m.
Alagia Auditorium

Morbidity & Mortality

Every Tuesday | 7 a.m.
7AB

TUMOR BOARDS Breast

Every Thursday | 11 a.m.
3rd floor tower conference room

General

Fourth Thursday | 4 p.m.
7th floor tower conference room

GI/Colorectal

First, third, and fifth Wednesday | 4 p.m.
7th floor tower conference room

Gynecology

Third Wednesday | Noon
Alagia Auditorium

Head & Neck

Third Wednesday | 7:30 a.m.
Cancer Center conference room

Lymphoma

First and third Wednesday | Noon
6th floor tower conference room

OB/GYN

Third Wednesday | Noon
Alagia Auditorium

Thoracic

First, second, third, and fifth
Thursday | 4 p.m.
7th floor conference room



Coming Soon

St. Agnes is gearing up for its 2009 Medical Staff Directory. Soon you will be receiving our data questionnaire in the mail. St. Agnes conducts this annual survey to ensure we have the most accurate information about you and your practice, as well as an up-to-date photo.

PHYSICIANS ON THE ST. AGNES MEDICAL STAFF CAN UPDATE THEIR INFORMATION ON OUR ONLINE PHYSICIAN DATABASE ANY TIME BY CALLING 410-368-2170. VISIT WWW.STAGNES.ORG AND CLICK ON "FIND A DOCTOR" TO REVIEW YOUR INFORMATION, THEN CALL WITH CHANGES.



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