

MARYLAND'S

HEALTH MATTERS



COVER STORY

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**UNIVERSITY
of MARYLAND
MEDICAL
SYSTEM**



ON THE COVER

RESTORING QUALITY OF LIFE FOR PARKINSON'S PATIENTS

The BIG and LOUD Program makes a big difference.



DR. JAMES W. EAGAN JR. GOLF TOURNAMENT SETS A NEW FUNDRAISING RECORD

Golfers, sponsors and donors raised more than \$200,000.

10 ACADEMIC MEDICINE AT WORK

Comeback Coach— Minimally invasive robotic surgery repaired D'avonte Fletcher's leaky mitral valve.




STAY CONNECTED WITH

UM ST. JOSEPH MEDICAL CENTER

THOMAS B. SMYTH, MD
President and CEO

MARY ANN HODES
Director of Marketing and Communications

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WE WOULD LIKE TO HEAR FROM YOU

Please send us your comments, information requests, change of address or opt-out requests to: umsjmatters@umm.edu; 7601 Osler Drive, Marketing Communications, Towson, MD 21204; or call **410-337-1700**.



University of Maryland

ST. JOSEPH MEDICAL CENTER

EARNs TOP HOSPITAL AWARDS



UM ST. JOSEPH NAMED AMONG THE TOP 10% IN THE NATION FOR PATIENT SAFETY.

UM ST. JOSEPH has been recognized as a 2024 Patient Safety Excellence Award™ recipient by Healthgrades. This national award recognizes hospitals throughout the nation that have the lowest occurrences of 14 key preventable patient safety events as designated by the Agency for Healthcare Research and Quality and reflects the medical center's commitment to delivering safe, high-quality care.

"One patient harmed is one too many," said Thomas B. Smyth, MD, president and CEO of UM St. Joseph. "Our mission and our daily work remain relentlessly focused on delivering consistently safe and effective care to honor the trust our patients and families place in us when they need help. We are honored and inspired by this award, and most proud to be among our community's—and the nation's—most reliably safe and trusted health care providers."

Healthgrades also has rated UM St. Joseph No. 1 in Maryland in Orthopedic Surgery and Spine Surgery, as well as rating the hospital among the Top 5 in Maryland for Cardiology and Critical Care. UM St. Joseph is also a 2024

Outpatient Joint Replacement Excellence Award™ recipient and has been named one of America's 50 Best Hospitals for Outpatient Joint Replacement, which includes hip and knee replacement.

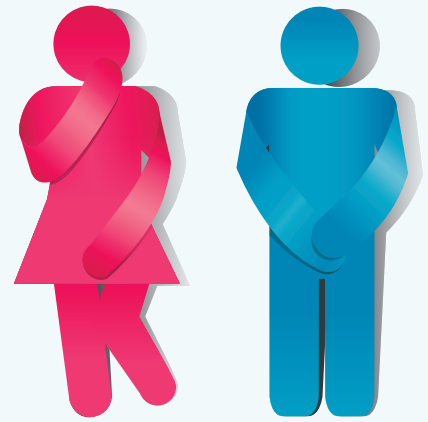
'PROUD OF HOW OUR WORK SUPPORTS OUR COMMUNITY'

"UM St. Joseph is proud to be recognized for our excellence in outpatient joint replacement," Dr. Smyth said. "In collaboration with our physician partners at Towson Orthopaedic Associates, our concerted focus on clinical quality and patient experience, along with our sustained investments in advanced medical technologies and in our orthopedic care team, help ensure that we remain Maryland's most trusted resources for successful joint replacement and an improved quality of life."

Healthgrades' 2024 analysis revealed that patients who seek care for a particular condition or procedure at a top-ranked hospital have a better chance of a good outcome.

Running to the Bathroom Frequently?

EXPERT HELP FOR PELVIC FLOOR DISORDERS



WOMEN AND MEN CAN DEPEND ON THE SPECIALISTS AT UNIVERSITY OF MARYLAND ST. JOSEPH OUTPATIENT REHABILITATION INSTITUTE.



Kristen Toussaint, MS, OTR/L

DISCUSSING INCONTINENCE AND related issues can be a difficult conversation but an important one to have with your health provider.

“If you are experiencing symptoms of pelvic pain, incontinence or painful intercourse, many things can be done to help you,” said Kristen Toussaint, MS, OTR/L, pelvic floor specialist with the Pelvic Floor Therapy Program at the

UM St. Joseph Outpatient Rehabilitation Institute. “These conditions don’t just happen with age. I have many patients in their 80s who are fully continent after therapy, even women who’ve had children. Don’t minimize your symptoms. Don’t be afraid to talk to your provider.”

The pelvic floor is a group of muscles and ligaments supporting the bladder, bowel and uterus, as well as the lower back. Pelvic floor therapy works to strengthen this group of muscles and minimize symptoms of pelvic floor weakness or dysfunction, which can occur in men or women.

CAUSES AND TREATMENTS

Toussaint explained that pelvic floor pain, incontinence or retention issues, such as not emptying the bladder or bowel, can be connected to tension, weakness, or either a muscular or bony imbalance.

“These problems could also be related to breathing issues, pelvic misalignment or bad habits, such as hip hiking a baby, always crossing your legs in the same way, drinking too much or emptying your bladder too often,” she said. “We can work on changes in behavior.”

Once the cause of incontinence or pelvic pain is determined, therapies can include exercise and activity that strengthens, lengthens or relaxes the muscles and structures surrounding the bladder, bowel or pelvic

organs. Biofeedback devices also can be used to support treatment.

“It sometimes takes a couple visits to address the issue,” Toussaint said. “Some people take longer to regain muscle coordination. It also depends on the severity of your symptoms.”

FOR EVERYDAY PELVIC HEALTH

Pelvic floor therapy works to:

- Restore muscle strength
- Retrain pelvic floor and core muscles
- Provide tools for long-term symptom relief

FOR PREGNANCY AND POSTPARTUM

This therapy may be recommended for patients who are pregnant or postpartum and experiencing:

- Back, pelvis or abdominal pain
- Leaking urine with activity such as jumping, running or sneezing
- Pain with intercourse

FOR UROLOGIC AND UROGYNECOLOGIC CONDITIONS AND PELVIC CANCERS

Pelvic floor therapy may be recommended for patients experiencing:

- Bladder or bowel urgency
- Pelvic or back pain
- Pelvic organ prolapse
- Urinary or fecal incontinence



For more information or to make an appointment with the Pelvic Floor Therapy Program at UM St. Joseph Outpatient Rehabilitation Institute, call **410-337-1349**.



BIG AND LOUD
THERAPY AT
THE MOVEMENT
DISORDERS
PROGRAM MAKES A
BIG DIFFERENCE.

Restoring Quality of Life **FOR PARKINSON'S PATIENTS**

CATHY DIETZ WAS searching for treatment for her husband Rick's shaking, weakness and vocal changes due to Parkinson's disease. She finally hit gold at 1 a.m.

"I was so elated that I wanted to wake him up," she recalled, "but I didn't want to disturb him, since he also has trouble sleeping because of Parkinson's."

So she waited until morning to let him know she had discovered the Movement Disorders Program at University of Maryland St. Joseph Outpatient Rehabilitation Institute.

"I was so happy that this program is at St. Joe's because it is the hospital we like to go to," she said. "Within two weeks, we had an appointment."

EXPERT CARE HAS MADE ALL THE DIFFERENCE

The Movement Disorders Program is led by medical director Lynn Chouhfeh, MD, who is board-certified in neurology and fellowship-trained in movement disorders. The Dietzes were immediately impressed. Not only did Dr. Chouhfeh adjust Rick's medication properly, but Rick, 71, enrolled in BIG and LOUD therapy.

"We met four times a week for four weeks, and I felt really good afterward," Rick said. "My voice got better. They worked with me on tasks that require fine motor skills like getting dressed, handwriting, brushing my teeth and getting in and out of bed."

“No two patients are alike. Parkinson’s disease is a complex disorder with diverse clinical features that include motor manifestations and non-motor manifestations, such as sleep disturbances, constipation and memory problems.”

—LYNN CHOUHFEH, MD, MEDICAL DIRECTOR OF THE MOVEMENT DISORDERS PROGRAM AT UM ST. JOSEPH OUTPATIENT REHABILITATION INSTITUTE



DIFFICULTY WITH MOVEMENT

One of the most common challenges people with Parkinson’s disease face is progressive difficulty with movement. Some patients experience falls, problems with walking, or challenges carrying out tasks of daily living, such as dressing and bathing themselves. Others develop tremors or have difficulty controlling movements. Communication and swallowing abilities can also be affected.

“Parkinson’s disease is a progressive neurological disorder,” Dr. Chouhfeh said. “While there’s no cure, treatment usually can help the symptoms. That’s what our program specializes in.”

ADDRESSING THE UNIQUENESS OF EACH PATIENT AS A TEAM

The Movement Disorders Program uses a multidisciplinary approach. In addition to Dr. Chouhfeh, the team includes occupational therapists Kristen Toussaint, MS, OTR/L, Katherine Grant, MS, OTR/L, and Kaylin Edwards, MS, OTR/L, speech-language pathologist Melissa Arasz, MS, CCC-SLP, and physical therapist Lauren Cavanaugh, DPT. All therapists have completed specialized training with the Parkinson’s Foundation.

The proper treatment of movement disorders can be challenging and requires care coordination and communication.

“We have a one-stop center with rehab services in one place,” Dr. Chouhfeh said.

Patient Frank Passaro, a former school principal, agrees. “Everything is in one place, and the staff all talk to each other about their patients’ treatment,” Passaro said. “I know where to go and exactly whom to call there. Dr. Chouhfeh is amazing. She is so knowledgeable. I highly recommend the program. Dr. Chouhfeh even offers seminars about Parkinson’s disease, which I attended with my wife.”

GETTING BIG AND LOUD

While the program’s treatment plans are tailored to each individual, a few research-based approaches tend to help most patients.

- **LSVT BIG** encourages patients to increase the size and pace of their movements through bigger steps, quicker steps and transitions, and more use of the body during movement.
- **LSVT LOUD** retrains patients to speak more clearly, use a louder voice and communicate with confidence.

Passaro, whose voice was weak and low when he began the program, said, “I learned to use techniques to speak louder.”

“Softening of the voice can be one of the hallmark symptoms of Parkinson’s disease,” Arasz said. “Voices may become hoarse, soft and monotone. Due to this, patients can experience less clear speech and feel frustrated about their voices. The ability to get to a good voice is still there. We just use different pathways.”

SIGNS OF PARKINSON'S DISEASE

- Constipation
- Dizziness or fainting
- Loss of sense of smell
- Masked or expressionless face
- Small handwriting
- Soft or low voice
- Stooping or hunching
- Tremor
- Trouble moving or walking
- Trouble sleeping

Arasz, whose grandfather, a retired physician, has Parkinson's disease, was inspired to go into speech therapy after witnessing how he has overcome his challenges. In addition to one-on-one speech therapy, Arasz is starting a group voice exercise class called LOUD for LIFE. The class is designed to maintain what patients have learned.

RETURN TO DOING THINGS YOU LOVE

Myra MacCuaig, 77, has always loved the outdoors and activities such as biking, hiking and swimming.

"I assumed that I would always do those and more," she said. "It was a blow being diagnosed with Parkinson's disease and coming to terms with the limitations."

Thankfully, participating in the BIG and LOUD program gave MacCuaig the new-found determination to continue what she loved. She found encouragement and hope by connecting with others who intimately knew about this disease. Now, she is back on her bike.

Passaro, 71, the former school principal, said that before the program, "I could not get in and out of the bathtub, and I couldn't even turn over in bed, so I couldn't sleep."

He has returned to teaching, working part-time with Baltimore County high school students doing mock trials.

"This has given me an opportunity to get back to working with young people, which I really love," he said. "My friends say they can't believe the difference."

MacCuaig, like other Movement Disorders Program patients, is grateful for the little things that people take for granted.

"Parkinson's makes your body feel stuck," she said. "You are not able to get your body to do what you want it to. I had lost the ability to use a knife and cut a steak. Occupational therapy has helped me with typing, handwriting and cutting things. I'm struck by how bright and caring everyone on the staff is. There's a lot of hope."



“On our first appointment, Dr. Chouhfeh met with us for an hour, listened to what we said, understood our perspective and included cognitive assessment in the evaluation.”

—CATHY DIETZ, WIFE OF PATIENT RICK DIETZ



The Movement Disorders Clinic is located on the third floor of the Cancer Institute within the UM St. Joseph Outpatient Rehabilitation Institute at 7501 Osler Drive, Suite 301. If you are experiencing Parkinson's disease symptoms and think you could benefit from a consultation, call **410-427-5505** or visit **umstjoseph.org/rehab** for more information.

Dr. James W. Eagan Jr.

GOLF TOURNAMENT SETS A NEW FUNDRAISING RECORD

THE UNIVERSITY OF MARYLAND ST. JOSEPH MEDICAL CENTER COMMUNITY CAME TOGETHER “FORE” A GOOD CAUSE. UM ST. JOSEPH MEDICAL CENTER FOUNDATION REACHED A NEW FUNDRAISING MILESTONE FOR THE BIENNIAL DR. JAMES W. EAGAN JR. GOLF TOURNAMENT.

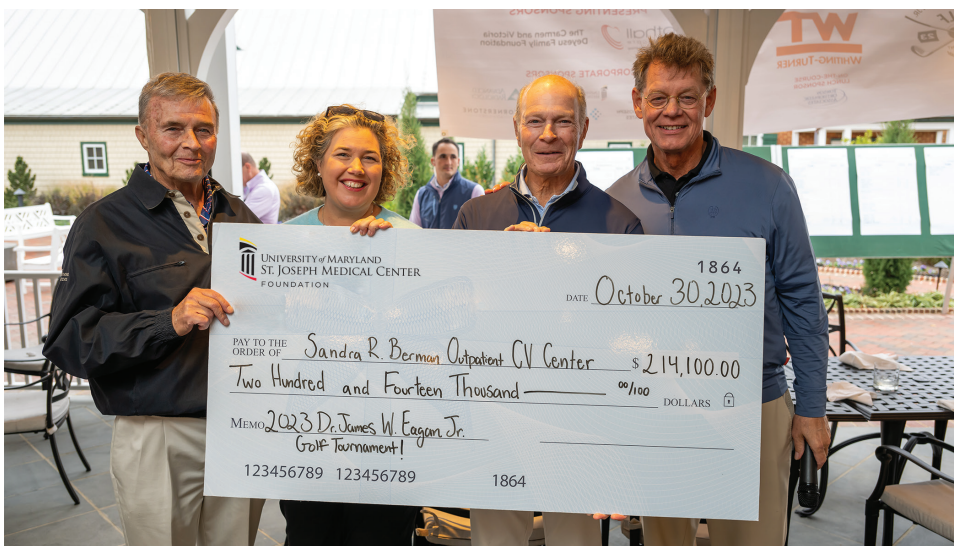
GOLFERS WERE GREETED with an unseasonably sunny day on Oct. 30, 2023, at Baltimore Country Club where they raised an astounding \$217,333 in support of the future Sandra R. Berman Outpatient Cardiovascular Center. That amount was the largest gross total the tournament has raised since its inception in 1989.

“This year’s event exceeded all of our expectations,” said Amanda “Mimi” Tinkler, vice president and executive director of UM St. Joseph Medical Center Foundation. “We could not have done it without the support and generosity of so many community partners and philanthropic individuals. Whether they have been golfing with us for years, or this was their first tournament, they are making a difference in our community, and, on behalf of everyone at UM St. Joseph, we are deeply grateful.”

Each Dr. James W. Eagan Jr. Golf Tournament raises money for a different area of need within the medical center.

This year, the proceeds from the tournament supported the future Sandra R. Berman Outpatient Cardiovascular Center. Inspired by feedback from our patients and by our cardiac providers’ vision for how they could best care for their patients, the center will provide a platform that fosters enhanced team collaboration while improving care access and delivery for all UM St. Joseph’s patients in the ambulatory setting.

“Projects like the Sandra R. Berman Outpatient Cardiovascular Center start as a dream, but the only way they come to life is through philanthropy,” UM St. Joseph president and CEO Thomas B. Smyth, MD, told tournament attendees, reflecting on the transformative quality philanthropy can have. “Please know that you were not only having fun on the course today, but you were also ensuring that a patient, a neighbor or even a loved one will soon benefit from your generosity.”



(L-R) Dr. Eagan, UM St. Joseph pathologist and the tournament’s namesake; Meghan Roy, UM St. Joseph Medical Center Foundation board chair; Ray Daue, UM St. Joseph Medical Center Foundation emeritus board director; and Dr. Smyth, UM St. Joseph Medical Center president and CEO, at the check presentation after the tournament. Additional support came in the following days, bringing the total raised to over \$217,000.





(From left) UM St. Joseph's chief of Cardiac Surgery, Rawan Salenger, MD, one of many cardiac providers who participated in the outing, rides his golf cart with Kevin Dunbar, friend and supporter of UM St. Joseph Medical Center.



Golfers had a chance to leave the tournament in a brand new car, courtesy of Bill Kidd's Toyota, if they sunk a hole-in-one on the ninth hole.



The tournament namesake, James W. Eagan, Jr., MD, (center) and his family pose for a photo after the record-breaking round of golf.



UM St. Joseph colleagues Beth Nash, BSN, RN (right), and Larry Moore, RN (second from left), pose with fellow golfers as part of Crothall Healthcare's foursome.



SPONSOR SPOTLIGHT

UM St. Joseph would like to give special recognition to the tournament's Title Sponsor, The Whiting-Turner Contracting Company; our Presenting Sponsors, Crothall Healthcare and The Carmen and Victoria Deyesu Family Foundation; and our Premium Giveaway Sponsor, MacKenzie Ventures LLC. Thank you to all of our sponsors, golfers and donors for making 2023 such a success!



Golfers gathered at their golf carts waiting to tee off.



Youth football coach D'avonte Fletcher is among the first people to have robotic mitral valve surgery at University of Maryland Medical Center.



With a guiding touch, the physician is able to perform delicate, minimally invasive procedures through robotic surgery.

Comeback COACH

A HEART PROBLEM PUT FOOTBALL COACH D'AVONTE FLETCHER ON THE SIDELINES. NOW, HE'S GETTING BACK IN THE GAME, THANKS TO A HIGH-TECH SURGERY.

IN EARLY 2023, D'avonte Fletcher, 30, a Huntingtown, Maryland, landscaper who also coaches youth football, sought medical help for some alarming symptoms.

"I was flown to University of Maryland Medical Center because I was swelling badly," Fletcher said. "I gained 13 pounds in a week."

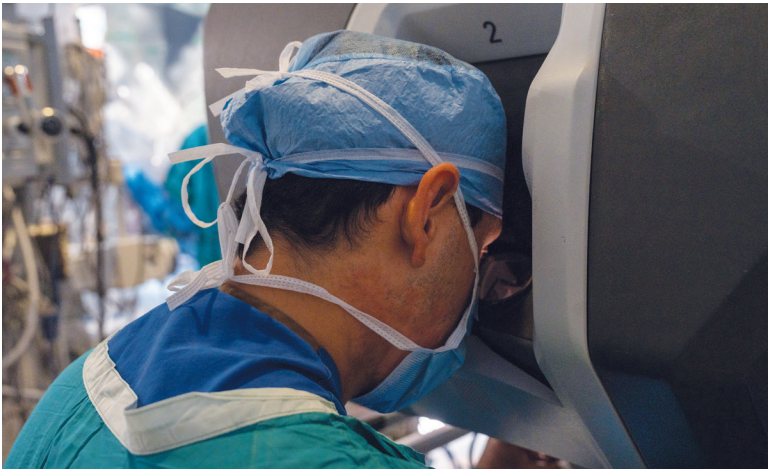
At UMMC, Fletcher learned he had heart failure. His cardiologist, Manjula G. Ananthram, MBBS, an assistant professor of medicine at the University of Maryland School of Medicine, identified the potential cause: a leaky mitral valve, one of four valves that help blood flow on a one-way route through the heart. If the mitral valve leaks or is too narrow, the heart may struggle to pump blood efficiently, potentially leading to heart failure or other problems.

Fletcher needed surgery to fix the valve.

Previously, some patients had to have open-heart surgery involving a large incision in the chest to repair or replace a faulty mitral valve. That wasn't the case for Fletcher, thanks to the arrival of robotic heart surgery in Maryland.

COMPREHENSIVE AND INNOVATIVE HEART CARE

No matter where you live in Maryland, University of Maryland Medical System is ready to help your heart. UMMS clinicians provide the full range of cardiac care. When a patient needs mitral valve repair, heart surgery specialists determine the best option, whether that means open heart surgery or a minimally invasive procedure. Recently, the



Dr. David Zapata performs minimally invasive mitral valve surgery with robotic assistance.

health system added to its legacy of innovation in heart care by becoming the first in Maryland to offer robotic mitral valve repair and replacement.

Cardiothoracic surgeon David Zapata, MD, assistant professor of surgery at the University of Maryland School of Medicine, began performing robotic mitral valve surgery at UMMC last year.

“Robotic surgery offers the exact same surgery that we would perform in an open manner, but it’s less invasive,” Dr. Zapata said. “Nothing about the technique or what I do during the operation changes. The key difference with robotic surgery is the approach and direction we take to reach the mitral valve.”

THE BENEFITS OF SPARING BONE

Dr. Zapata partners with an interventional cardiologist to determine the best treatment approach for each patient with a mitral valve disorder. Surgical options depend on the patient’s anatomy and condition. For example, a patient with mitral regurgitation may be able to avoid open heart surgery if they qualify for a transcatheter interventional minimally invasive valve repair.

Open-heart surgery is often relied upon when direct access to the heart and nearby blood vessels is needed. During open-heart mitral valve surgery, the surgeon makes a large incision in the chest and separates the sternum (breastbone), which is known as a median sternotomy. When Fletcher saw Dr. Zapata, he was pleased to learn he wouldn’t need a median sternotomy.

“Dr. Zapata told me he was going to do the surgery with the robot—something I’d never heard of,” Fletcher said. “I thought it was cool that he could do the surgery in less time, allowing me to get moving sooner.”

With robotic surgery, the surgeon approaches the heart between the ribs through several small incisions, the largest of which is only three centimeters.

“With robotic surgery, no bone needs to heal,” Dr. Zapata said. “Therefore, patients usually heal faster and have a lower risk of wound complications. With a median sternotomy, sometimes the bone doesn’t heal correctly, which can lead to wound infections in the sternum.”

STAYING AHEAD OF WORSENING HEART FAILURE WITH REMOTE MONITORING



Albert Hicks III, MD, MPH

Understanding when heart failure is getting worse can be tricky.

“The first sign of worsening is rising blood pressures in the heart, especially in the artery that takes blood to the lungs,” said cardiologist Albert Hicks III, MD, MPH,

assistant professor of medicine at the University of Maryland School of Medicine and section chief of heart failure and transplant at University of Maryland Medical Center. “This can be a sign the body isn’t getting rid of enough fluid. A rise in pressures can happen up to a month before patients experience symptoms. If we can see a rise in pressures, we can make adjustments to prevent hospital stays and related problems.”

Medical providers have long needed better tools to help them find poorly controlled heart failure. Now, cardiologists at the University of Maryland Heart and Vascular Center can use a device placed inside patients’ arteries to monitor their blood pressures remotely. They can adjust patients’ medicine if they see heart failure getting worse.

The remote monitoring device, which goes into the artery during a simple procedure, measures the pressure in the blood vessel. Patients send the data to their cardiologist daily by lying on a sensor for 18 to 20 seconds. If the monitor indicates a problem, the cardiologist contacts the patient and tells them to change how much medicine they take.

“We find that patients with heart failure who receive the remote monitoring device have improved survival and reduced hospitalizations compared with those who have heart failure and don’t receive the device,” Dr. Hicks said. “So, not only does this technology keep people out of the hospital, but it also helps keep patients alive.”



Watch a video of Dr. Zapata talking about robotic mitral valve surgery at umm.edu/roboticheartsurgery.



After having robotic surgery, some patients are able to leave the hospital several days earlier than those who have open-heart surgery. Patients experience less postoperative pain without a large incision. With the breastbone undisturbed, patients can get back to driving, exercising, performing chores around the house and lifting heavy items weeks earlier than after open-heart surgery.

For Dr. Zapata, the robotic system's cameras allow him to view the heart valve with unparalleled clarity from as close as one centimeter—much closer than he could get by standing over the patient. In addition, the robot's instruments, which he controls from a console, move in ways human wrists can't. These factors help Dr. Zapata operate with the highest level of precision.

'100 TIMES BETTER'

Dr. Zapata repaired Fletcher's mitral valve in November 2023. After being out of work for a year and a half due to his heart, Fletcher is easing back into it.

"I'm taking my time, but I feel 100 times better," he said. "Before surgery, I noticed my breathing and little things like that. Now, when I work out, I'm not as tired as before, and I move around better than I did previously. I would definitely recommend Dr. Zapata and the robot."

Dr. Zapata and his colleagues are exploring use of the robot for other types of heart surgery such as tricuspid valve surgery, atrial septal defects, atrial fibrillation procedures, and cardiac tumor removal. All patients who are seen by Dr. Zapata and his colleagues are considered for a less-invasive, robotic approach to heart surgery.

"A less-invasive approach helps with patient recovery," Dr. Zapata said. "The emphasis UMMS places on less-invasive procedures shows we're thinking about how we can help patients have the best experience in the hospital and in their lives."



To learn about heart care at UM St. Joseph, use this QR code or visit umstjoseph.org/heart.



MANAGING **DIABETES** AND **STROKE RISK**

PROTECT YOURSELF WITH HEALTHY LIFESTYLE CHANGES.



PEOPLE LIVING WITH diabetes are twice as likely to have a stroke than people who are not.

The risk is especially high when diabetes is not well controlled. Excess blood glucose stiffens blood vessels and allows fatty deposits to build up, increasing the risk of blood clots that could lead to a stroke.

People with diabetes are more likely to be disabled or die from a stroke. Those with prediabetes—blood sugar levels higher than healthy but not high enough to be considered diabetes—are at a greater risk for stroke as well.

HEALTHY LIFESTYLE CHOICES MATTER

To reduce the risk of stroke, follow the diabetes medication regimen prescribed by your health care provider. Get regular tests and know your A1C, blood pressure and cholesterol numbers. Ask your provider to assess your risk of cardiovascular disease and if you can do more to stay healthy.

In addition, lower stroke risk by choosing to maintain a healthy weight, exercise regularly, follow a heart-healthy eating plan, avoid tobacco products, limit alcohol use and manage stress.



Watch a video featuring a diabetes and stroke expert at the University of Maryland Medical System at umms.com/Diabetes-Stroke-Podcast or use this QR code.



Scan me

Symptoms of HEART FAILURE

HEART FAILURE IS PROGRESSIVE AND MAY START WITH MILD SYMPTOMS THAT CAN BE EASY TO OVERLOOK.

IF YOU ARE experiencing one or more of the following symptoms, talk with your doctor about whether your heart is pumping all the blood and oxygen your body needs.



CONFUSION

Heart failure can lead to memory loss or impaired thinking.



COUGHING

You may have a chronic cough that produces pink or white mucus.



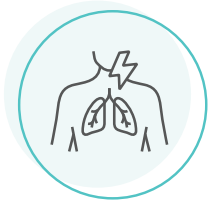
FATIGUE

You may feel exhausted after even basic activities, such as grocery shopping.



LACK OF APPETITE

You may feel full or nauseated, even when you haven't eaten.



SHORTNESS OF BREATH

You feel shortness of breath with regular activity that worsens with exertion. You have trouble breathing when you lie flat.



SWELLING

Buildup of fluid (edema) may occur in your feet, legs, hands and abdomen.



INCREASED HEART RATE

Your heart may start racing or throbbing.



WEIGHT LOSS OR GAIN

Sudden changes in weight are common due to lack of appetite and fluid buildup.

4 STAGES OF HEART FAILURE

Stage A.

You are at high risk for heart failure but don't have either symptoms or structural heart disease.

Stage B.

You have structural heart disease but no symptoms of heart failure.

Stage C.

You have both structural heart disease and heart failure symptoms.

Stage D.

You have advanced heart failure. This means you have severe symptoms and your heart is not functioning well.

Learn more about heart failure and UM St. Joseph's Bridge Clinic.



Community Health Events

SCREENINGS

BODY COMPOSITION ANALYSIS

To identify your unique body makeup and associated health risks, the professional scale uses bioelectric impedance analysis to determine weight, body fat, body mass index, total body water, muscle mass, metabolic rate and more. Appointments are required. Those with electrical devices (i.e., pacemakers) or those who are pregnant are not eligible for the screening. You will need bare feet to participate. Call **410-337-1479** to register. Screenings take place at the Irwin Center.

Jun 25 1-3pm

Aug 22 10am-noon

PROGRAMS

AMERICAN RED CROSS BLOOD DRIVES

Schedule a lifesaving donation. For medical and eligibility questions, call **1-866-236-3276** before scheduling your appointment. To register, visit redcrossblood.org or call **1-800-733-2767**. All blood drives are held at UM St. Joseph Medical Center. For assistance with navigation, email umsjmc-communityhealth@umm.edu or call **410-337-1479**.

Jun 11 7:30am-1:30pm

Aug 6 7:30am-1:30pm

Jul 9 9am-3pm

Sep 5 9am-3pm

HUNGRY HARVEST PRODUCE MARKET

Come shop at a local pop-up produce market. Build the produce bag that's right for you at less than grocery store prices. Produce varies at each market. Cash, debit and credit accepted. The market is held at the Jordan Breezeway connected to the Jordan Parking Garage and Jordan Visitor Parking Lot. A limited supply of shopping bags is available on a first come, first serve basis. Customers are highly encouraged to bring their own bags. Free parking is available in Jordan Visitor Parking Lot. Call **410-337-1479** or email umsjmc-communityhealth@umm.edu with questions.

Jun 28 9-11am

Jul 10 9-11am

Jul 23 8:30-10:30am

Aug 8 10am-noon

Aug 27 11am-1pm

Sep 24 8:30-10:30am

PREVENT T2: A PROGRAM DESIGNED TO PREVENT TYPE 2 DIABETES

This program is designed for those who have been told they have prediabetes and/or risk factors for developing Type 2 diabetes. The purpose of this class is to prevent or delay the onset of Type 2 diabetes. The group meets regularly for a full year. Registration is required. Call **410-337-1479**. Scan the QR code to learn more about the program and determine your risk for developing Type 2 diabetes.



CLASSES AND SUPPORT GROUPS

STROKE SURVIVOR SUPPORT GROUP

This group provides a forum for learning, listening and socializing with others. Our free stroke support group encourages participants to share their experiences as well as offer comfort and empowerment. A team of stroke professionals will provide useful information about healthy living, stroke management and support after experiencing a stroke. Call **410-427-2175** or contact karengonzalez@umm.edu to register. Held on the third Tuesday of every month from 2 to 3:30pm.

BEYOND INTENSIVE CARE: SURVIVING AND THRIVING

This free peer support group is provided by UM St. Joseph for current and past ICU patients and their loved ones. Information and resources will be shared by guest speakers, and participants are encouraged to share their experiences in open discussion. For more information and to register, email beyondintensivecare@umm.edu. Meets virtually and in person every first Wednesday of the month from 5 to 6pm.

CROHN'S DISEASE AND COLITIS SUPPORT GROUP

This FREE adult support group provides patients, with their families and friends, an opportunity to meet and talk with others who have similar experiences with Crohn's disease and ulcerative colitis. All meetings are facilitated by a registered nurse and held in the Noppenberger Auditorium.

For registration, call **410-337-1537**. Meets in-person on the second Tuesday of every other month.

Jul 9 7-8:30pm Sep 10 7-8:30pm

FAMILY EDUCATION CLASSES

Visit umstjoseph.org/ReadyforBaby or call **410-337-1880** to register. Fees apply.

CHILDBIRTH EDUCATION CLASS (IN-PERSON AND VIRTUAL CLASSES AVAILABLE)

Led by experienced labor and delivery registered nurses certified in childbirth education, this class covers basic coping and relaxation techniques, the important role of a support person, the stages of labor, pain relief options such as medications and helpful labor positions, postpartum care, and other important topics related to the birthing experience. We will also review what you can expect during your stay at University of Maryland St. Joseph Medical Center. An in-person tour is also provided.

CUSTOMIZED INDIVIDUAL CHILDBIRTH EDUCATION SESSIONS

We're flexible! If you are unable to attend our scheduled in-person classes or would prefer individualized instruction, one-on-one customized telephone or video-call consultations with a childbirth educator can be arranged for your convenience. We will provide you with all the information you need for these personal sessions. A virtual tour is also provided. Sessions will be scheduled at mutually convenient times for the participants and instructor.

BREASTFEEDING CLASS

Led by a certified lactation consultant, this class helps expectant parents learn the benefits of breastfeeding and offers helpful techniques and tips for breastfeeding success. Virtual and in-person options are available each month.

BREATHING EASIER FOR BABY: A BREATHING & RELAXATION CLASS

Breathe easier as you prepare for childbirth! This class provides you and your support person extensive instruction in relaxation and breathing techniques for a calmer and more empowered labor and delivery. You'll also learn about other comfort measures and birth positions to help naturally manage pain.

EARLY PREGNANCY FAQs: A VIRTUAL CLASS FOR EXPECTANT PARENTS

Before your first OB appointment, you're invited to join us for a monthly online session to learn about what to expect when you're expecting and to understand the basics of early pregnancy.



SPINNING BABIES® BIRTH PREPARATION CLASS

This class highlights your baby's active role in rotating down and out of the pelvis during birth. In this class, you and your support person will learn techniques to use during pregnancy and labor to help your baby find the optimal position for labor. We'll explore activities that bring balance to your body and address any restrictions in your pelvis to help "make room" for baby. The class is recommended for anyone seeking to increase their chances of an easier pregnancy or birth and is ideal any time after 23 weeks of pregnancy.

LITTLE LATCH CLUB

New just-for-you time with baby: Our supportive club offers a safe, relaxing, baby-friendly time for new moms to connect with their little ones and each other as they share the blessings and challenges of motherhood. Little Latch Club is hosted by our board-certified lactation consultants and offers moms a place to share feeding questions and concerns, gain breastfeeding knowledge and support, and make new, lifelong friends! We know that breastfeeding can be challenging. Wherever you find yourself on the journey—exclusively breastfeeding, pumping, bottle-feeding or at any other stage—know that you are welcome here.

GRANDPARENTS' UPDATE

This course helps new grandparents get up to speed on modern approaches to newborn care to support new parents. You will learn about the latest health and safety concerns as they pertain to infants, including CPR tips and more.

CAR SEAT SAFETY CHECKS

We offer FREE car seat safety checks by certified child passenger safety technicians to help parents ensure their little one's safety during each car ride. Our safety checks take place at Long Green Volunteer Fire Company in Glen Arm, Maryland.

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