

# MARYLAND'S

HEALTH MATTERS

COVER STORY:

## A CHANGE IN HEART AND VASCULAR CARE FOR OUR COMMUNITY

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**SPRING 2022**

**KNOW  
YOUR RISK,  
PROTECT  
YOUR HEART**

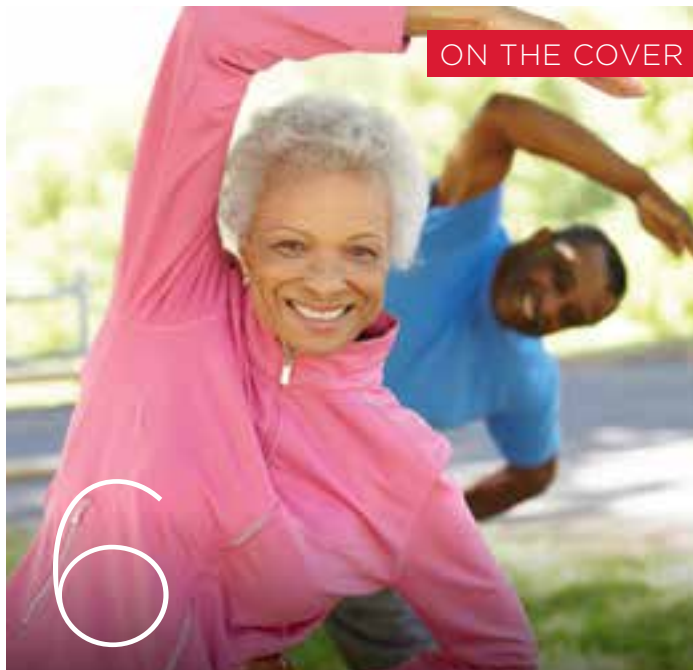
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**ACADEMIC MEDICINE AT WORK  
HELP FOR THE LITTLEST:  
PREPARING NICU BABIES FOR  
SUCCESS**

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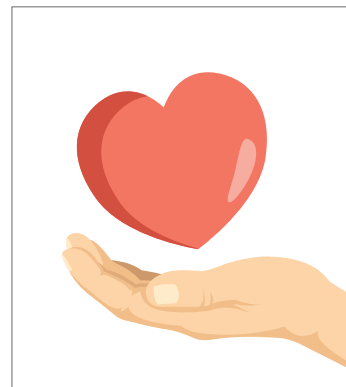


UNIVERSITY of MARYLAND  
CAPITAL REGION HEALTH



## A CHANGE IN HEART AND VASCULAR CARE FOR OUR COMMUNITY

Life-saving treatments at the Heart & Vascular Institute at University of Maryland Capital Region Health



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## KNOW YOUR RISK, PROTECT YOUR HEART

Taking control of heart health with a five-minute online risk assessment

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## ACADEMIC MEDICINE AT WORK

Help for the Littlest—Preparing NICU babies for success



UNIVERSITY of MARYLAND  
CAPITAL REGION HEALTH

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Please send us your comments, information requests or change of address to: [thom.householder@umm.edu](mailto:thom.householder@umm.edu)

or **University of Maryland Capital Region Health, c/o Marketing, 901 Harry S. Truman Drive North Largo, MD 20774.**



# FORGING FORWARD

WE ARE A FEW months shy of University of Maryland Capital Region Medical Center's one year anniversary. Looking back, we have learned many lessons in opening a new hospital in the midst of a pandemic.

I am grateful for our team members who displayed resilience and unwavering commitment to serve those needing care in an environment that has changed frequently throughout the pandemic. I say without reservation that our team members have been working in the most challenging health care environment in my history as a hospital administrator.

This unprecedented pandemic, paralleled with a nationwide staffing crisis and efforts to adapt to new and improved systems of care delivery in a state-of-the-art hospital, has tested the greatest efforts of our team members.

As we continue our journey to transform health care in Prince George's County, I ask for your support and partnership in embracing our health care team members with grace and appreciation for their steadfast commitment to serve in such an arduous environment.

Your expressions of compassion, kindness and appreciation to our team members are one way you can humbly inspire and refuel their passion of service before self.

Our journey is only beginning, and we will continue to strive for excellence in how we serve the community.

With appreciation,  
Nat

Nathaniel Richardson, Jr.  
President & Chief Executive Officer  
University of Maryland Capital Region Health



## REGIONAL CANCER CENTER CONSTRUCTION UNDER WAY

UNIVERSITY OF MARYLAND CAPITAL REGION HEALTH has begun construction on its new regional cancer center in an effort to meet the needs of Prince George's County residents and others in the surrounding areas.

The cancer center will establish high-quality comprehensive cancer care services, with an initial focus on the following cancers:

- Breast cancer
- Colorectal cancer
- Lung cancer
- Prostate cancer

The goal of the new regional cancer center is to reduce the cancer disease burden in our local community. Prince George's County has the highest percentage of cancer cases and cancer deaths among African Americans—more than any other county in the state of Maryland. The timing could not be better to provide the community with greater access to cancer screenings, leading to earlier detection and diagnosis of cancer, and better outcomes for patients.

The new facility is an addition to the UM Capital Region Medical Center that opened in spring 2021. Patients seeking cancer treatment will experience comprehensive cancer care services in a convenient setting and will benefit from a "one-stop shop" for all their oncology needs in a location close to home.

The regional cancer center will be affiliated with the University of Maryland Greenebaum Comprehensive Cancer Center (UMGCCC) and will help address health disparities in Prince George's County by expanding the reach of life-saving clinical trials into the community. UMGCCC is one of only 51 National Cancer Institute (NCI)-designated Comprehensive Cancer Centers in the country.

The staff of UM Capital Region Health is excited to bring this expanded care to our community.



TAKE STEPS  
TO AVOID *Diabetes*  
BY LEARNING TO REDUCE RISK

TAKE CHARGE OF YOUR HEALTH BY ENROLLING IN A  
DIABETES PREVENTION PROGRAM THAT WORKS.

**IN MARYLAND, 10.5%** of adults (nearly 500,000) have diabetes, and many of them don't know it. With diabetes ranking as the sixth-leading cause of death in the state, something must change.

"We're consistently one of 25 states with the highest rate of diabetes," said Angela Ginn Meadow, RN, RDN, program director of the Baltimore Metropolitan Diabetes Regional Partnership at University of Maryland Medical Center. "This disease affects quality of life, whether that means people feel burned out from non-stop management or experience complications from uncontrolled diabetes."

In addition to the 500,000 people in Maryland who have diabetes, 1.5 million more have prediabetes. Left undiagnosed or ignored, prediabetes becomes diabetes. When it does, your risk skyrockets for nerve and foot problems, heart and kidney disease and more. But these problems aren't inevitable.

With education and lifestyle changes, you can address prediabetes, reduce your risk of developing Type 2 diabetes and live life to the fullest.

**YOU NEED TO KNOW**

Diabetes education is vital, especially:

- At diagnosis
- When blood sugar targets are not being met
- When emotional or physical factors make management more difficult
- During a major life transition that affects diabetes

**PREVENTION,  
STILL THE  
BEST MEDICINE**

As diabetes numbers have risen, science has worked to keep up. Thanks to advances in medicine, diabetes management is simpler and more effective than ever. Despite these improvements, diabetes treatment remains a last resort.

"When necessary, diabetes can be treated, managed and controlled," said Stephanie Selby, RN, BA, vice president of Clinical Operations for the UMMS Population Health Services Organization. "However, diabetes can also be prevented through early screening and lifestyle changes. Our programs and services make that possible."

Routine diabetes screening occurs during your annual wellness check starting around age 45. You'll start earlier if you're overweight or obese, have one or more other diabetes risk factors, or are a woman who developed gestational diabetes during pregnancy.

Screening involves a simple blood test. Your provider takes a blood sample and sends it to a laboratory for evaluation. If your blood glucose is high, follow-up tests will confirm a diagnosis of prediabetes or diabetes.

And the lifestyle changes Selby mentioned? They can be more effective than medication alone for preventing Type 2 diabetes. For your lifestyle to have impact, you've got to stick with it day after day, year after year.

**HELP CLOSE  
TO HOME**

The University of Maryland Medical System has preventive and acute care practices across the state. Partnering with our patients, we are providing a better state of care to Marylanders.

Some of the counties we serve include:

Anne Arundel County

Baltimore City

Baltimore County

Caroline County

Cecil County

Charles County

Dorchester County

Harford County

Howard County

Kent County

Prince George's County

Queen Anne's County

Talbot County

## THE COST OF DIABETES

Diabetes and prediabetes affect all aspects of personal life, including financial health.

In 2017, **\$327 billion** was spent in the U.S. on diabetes care. That equals one of every four dollars spent on health care overall—an average of nearly **\$10,000** per person diagnosed with diabetes.

Smart steps that help prevent diabetes include:

- Eating and cooking healthy meals
- Getting 150 minutes of physical activity each week
- Losing 5% to 10% of body weight
- Practicing stress reduction
- Stopping smoking

Accountability helps the changes stick. Work with your primary care provider. Find a friend who will push you to stick with it. Get your entire family involved. Otherwise, your healthy habits will face obstacles in the comfort of your own home.

## DIABETES, UNDER CONTROL

When it's too late for prevention, proper management is essential. Diabetes self-management training and ongoing education are available to help you manage the condition and reduce the risk of complications.

Primary care providers, dietitians and diabetes educators can help with dietary management and long-term lifestyle changes. They can point you to community resources for ongoing diabetes education. They can teach you the right dosage of medicine to take at the right time, keep you updated about treatment options, and monitor possible effects of diabetes on your mental or emotional health. These experts can guide you on your diabetes journey, but you are ultimately in charge of your health.

"Patients who take responsibility for their care do better," said Peter LoPresti, DO, medical director of population health for the UMMS Population Health Services Organization. "Understanding the effects of diabetes means being better equipped to stay healthy."



Visit [umms.org/diabetes](https://umms.org/diabetes) to find diabetes care close to home.



To learn more about the diabetes prevention program, call **240-677-2130**.



# TAKING ACTION TO PREVENT DIABETES

THE NATIONAL DIABETES PREVENTION PROGRAM CAN HELP YOU TAKE CONTROL OF YOUR HEALTH.

**UNIVERSITY OF MARYLAND CAPITAL REGION HEALTH** is dedicated to encouraging people in the community to live healthy lives.

"Helping residents improve their health behaviors is our top priority," said Sabra Wilson, director of community health at UM Capital Region Health. "In 2017, diabetes was the fifth leading cause of death in Prince George's County, and approximately 12.3% of adults in the county have the disease."

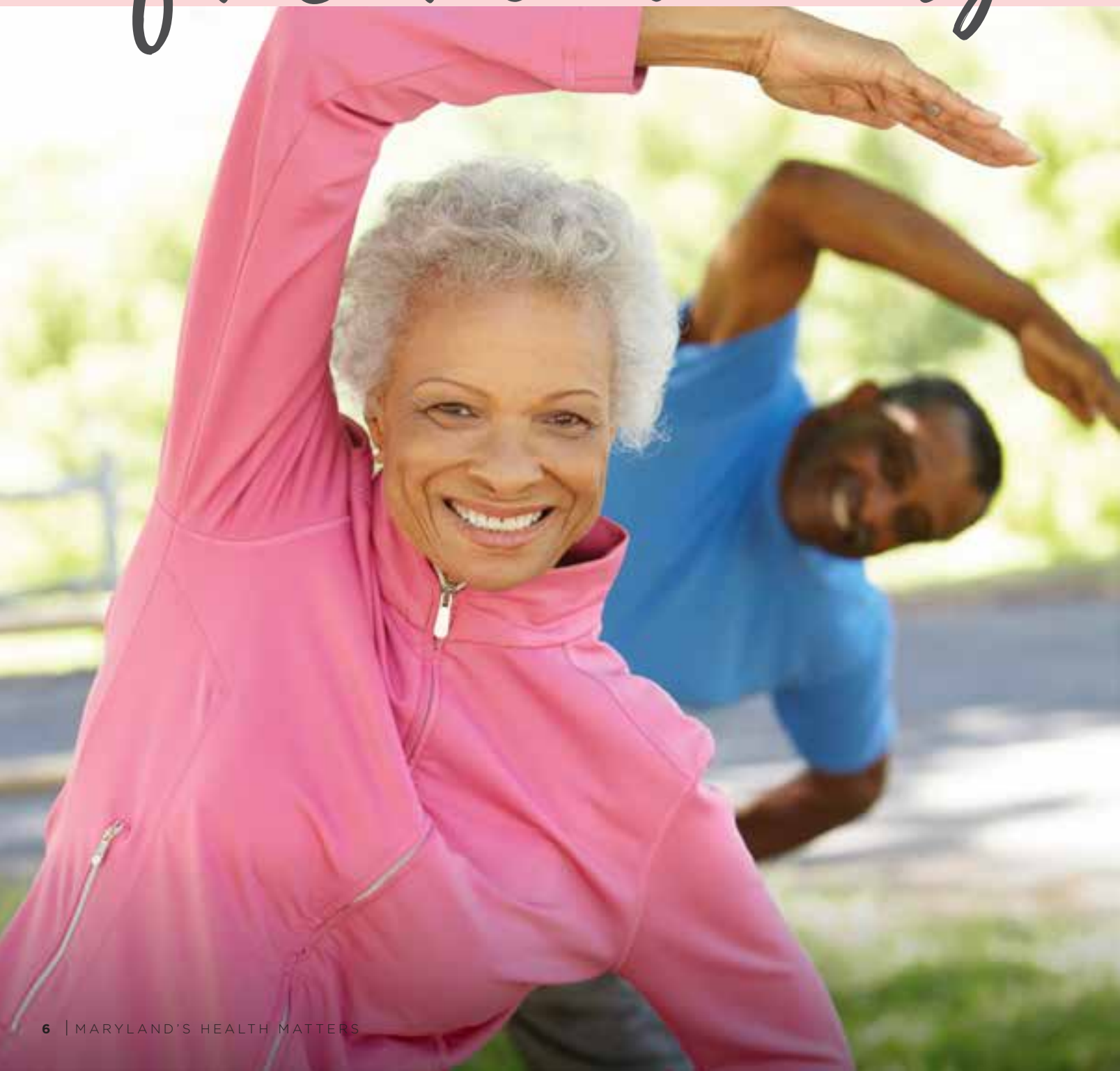
In an effort to reverse this trend, UM Capital Region Health is participating in the National Diabetes Prevention Program (DPP), a research-based lifestyle program recognized by the Centers for Disease Control and Prevention. Over the course of a year, DPP helps people who have prediabetes to commit to healthy eating and exercise habits.

"We help people develop new behaviors in a supportive environment," said Stacey Little, vice president of women's services and community and population health at UM Capital Region Health. "We encourage people to come with a friend or family member—someone who will walk the journey with them. We've seen great success with participants losing between 13% to 18% in weight. It's not a quick fix, but it's making a commitment to leading a healthy life."

The program is currently being held virtually, but the DPP team hopes to offer in-person classes in the future.

A CHANGE IN  
**HEART AND VASCULAR CARE**

*for Our Community*



DESPITE BEING A NONSMOKER, JOHN SMITH\* WAS DIAGNOSED WITH PERIPHERAL ARTERY DISEASE (PAD) IN DECEMBER 2021. THIS IS THE STORY OF HIS RECOVERY.

*\*Stock photo. Patient's name has been changed to protect his identity.*

**WHEN JOHN SMITH RETIRED** last fall, he planned to spend more time with his family. Although he loved his job, a heart attack in 2009 made him realize exactly how short his life could be.

"I didn't drink or smoke, so I thought I was all good," Smith said.

But ongoing Type 2 diabetes, high blood pressure and chronic kidney disease took a toll. One day he noticed an unusual blister on his foot. He saw a doctor, but the prescribed ointment did very little.

"The toe started to look black, so I knew I had to go back to the doctor," Smith said.

He was given antibiotics, but his foot did not improve. Then came 10 days of hiccups. Finally, in late December, his wife drove him to the new University of Maryland Capital Region Medical Center. Not only did he have COVID-19 despite being vaccinated and boosted, but he was diagnosed with peripheral arterial disease, or PAD.

"They told me the big toe was dead, and the second toe was already gone too, and the other toes were on their way to dying," Smith said. "I'm 55 years old, alone in the hospital, and I was crying because all I wanted was to get back to my family."

## CRITICAL CARE AT THE HVI

UM Capital Region Health launched its Heart & Vascular Institute (HVI) in 2020 specifically to serve Prince George's County patients. The brainchild of Jamie Brown, MD, associate professor of surgery at the University of Maryland School of Medicine and medical director of the HVI, the Institute was created to provide better treatment for the large number of Prince George's County residents who have heart disease—the leading cause of death in the country.

"The goal of the Institute is to provide the best cardiovascular care available anywhere, but it's right here in your community," Dr. Brown said.

Since moving into the newly constructed UM Capital Region Medical Center in Largo in the summer of 2021, the HVI has expanded its services and technical capabilities. One floor of the hospital is dedicated entirely to heart and vascular care with private patient rooms.

"The facilities are leading-edge, using the latest in advanced imaging—like fluoroscopy and intravascular ultrasound—that allows us to do complex procedures that we were not previously able to do," said Nathanael Dayes, MD, board-certified vascular and general surgeon at UM Capital.

Even before the move, the HVI at UM Capital Region Health scored in the top 10% in the nation for coronary artery surgery outcomes, according to The Society of Thoracic Surgeons. It was also recognized by *U.S. News & World Report* as a top performing hospital for heart failure treatment.

"We now can provide access to excellent care without compromise regarding technology or expertise. We are now on par with any facility in the U.S.," Dr. Brown said. "Our cardiac catheterization lab, electrophysiology lab and operating suites were designed based on international models of excellence."

## ADVANCED SURGERY FOR NEW CHANCES AT RECOVERY

When Charles Fox, MD, associate professor of surgery at the University of Maryland School of Medicine and attending vascular surgeon at UM Capital, saw Smith, he worried that he might have to remove most of his leg.

"Often an infection in the foot is misinterpreted as an ingrown toenail or gouty arthritis, but this was a rather late-stage presentation with gangrene of the foot," Dr. Fox said.

## WHAT NEW TECHNOLOGY MEANS FOR HVI PATIENTS

The new University of Maryland Capital Region Heart & Vascular Institute has multiple new technological capabilities. A full-service electrophysiology service line means patients will be able to get treatment for atrial fibrillation and ventricular tachycardia—abnormal heart rhythm conditions—close to home.

"Previously, if someone came to the hospital with an urgent heart rhythm problem, they often had to get transferred to a different facility," said Mohit Rastogi, MD, FACC, FHRS, director of electrophysiology at UM Capital.

The HVI has a 1,000-square-foot hybrid operating room that allows both diagnostic and interventional treatment. The suite combines the facilities of a cardiac catheterization lab with the space to perform open-heart procedures.

"It's probably one of the most sophisticated rooms in the state, if not in the country, with the most advanced imaging systems that are available on the market," said Charles Fox, MD, attending vascular surgeon at UM Capital.

## LOCAL CARE FROM LOCAL PROVIDERS

The University of Maryland Capital Region Heart & Vascular Institute is committed to providing convenient, quality care to patients who don't want to go to Washington, D.C. or Baltimore. The HVI is also proud to employ several staff and physicians who are from Prince George's County.

"I grew up here and went to Eleanor Roosevelt High School in Greenbelt," said Clarence Findley, MD, PhD, FACC, FSCAI, coronary and structural interventional cardiologist at UM Capital. "I left the area when I was 17 for college, but the pandemic made me want to be closer to my family. I also realized that Prince George's County has not had the level of specialized cardiac care that it needs, so I wanted to see if I could play a role in its transformation."

Dr. Findley is just one of the dozens of staff members who grew up here or who are longtime residents.

"We're trying to cultivate an air of compassion as well as quality, evidence-based medical care at the HVI," Dr. Findley said. "We want patients to know that they aren't just another number, but a human being who is also a parent or a grandparent or a spouse—and we understand that."

After diagnostic studies, which included angiography, a type of imaging using dye injected into blood vessels to see any blockages, Dr. Fox decided to perform a vascular bypass in Smith's leg. Less invasive procedures can treat earlier-stage PAD, but in this case, it was too late.

"Thankfully, this restored the circulation to his foot and allowed us to do a limited amputation of just his toes, rather than an amputation below or above the knee," Dr. Fox said.

Teresa Hilliard, DPM, podiatrist at UM Capital, performed the amputation, and Smith's multidisciplinary care team was able to save his leg.

"This is a big deal. Eventually, he will be able to go back to enjoying an active lifestyle, and that's a major win," Dr. Fox said.

After over two weeks in the hospital, Smith was able to return home. He is now walking with a cane and looking forward to being able to once again play with his youngest teenaged son.

"The doctors who performed the surgery did a wonderful job, and I appreciate them," Smith said.

People with Type 2 diabetes are especially at risk for PAD and related foot problems, along with corresponding heart disease. Taking the UM Capital online heart disease health risk assessment is a great way to determine your risk before problems get worse (learn more on page 9).

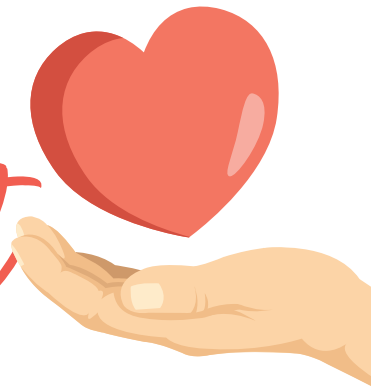


Do you need vascular care? If you have foot problems, diabetes, or other risk factors for PAD, make an appointment with your vascular specialist or find one at [umcapitalregion.org/vascularcare](https://umcapitalregion.org/vascularcare).





# KNOW YOUR RISK, *Protect Your Heart*



A FIVE-MINUTE ONLINE HEART DISEASE RISK ASSESSMENT CAN HELP YOU TAKE CONTROL OF YOUR HEART HEALTH.

**HEART DISEASE** is the leading cause of death in the United States, as well as in Prince George's County. The good news is there are things you can do to manage your personal risk and stay healthy.

University of Maryland Capital Region Health offers an online heart disease risk assessment (HRA) that can give you a clear understanding of your risk for cardiovascular disease.

## **FIVE MINUTES TO BETTER HEART HEALTH**

The HRA is a questionnaire that takes five minutes to complete. You'll be asked multiple-choice questions about your overall health and lifestyle, including:

- Amount of physical activity
- Blood pressure
- Cholesterol
- Family health history
- Heart health history

Based on your responses, you'll receive a personalized report detailing your risk of cardiovascular disease, as well as diabetes, high blood pressure and high cholesterol. The report includes valuable information on how to reduce your risk and make healthy lifestyle changes. You can take this report to your primary care physician or cardiologist to discuss the results and what they mean for your health.

## **WHAT ARE THE RISK FACTORS FOR HEART DISEASE?**

Many different factors affect your risk for developing cardiovascular disease. Some of these risk factors are out of your control, but others are lifestyle choices that you can change.

These risk factors include:

- A diet high in saturated and trans fats and cholesterol
- Diabetes
- Excess alcohol consumption
- Family history of heart disease
- High blood pressure
- High cholesterol
- Lack of physical activity
- Obesity
- Smoking

The heart disease HRA can help you determine what your most significant risk factors are, as well as how to overcome them. If your risk is high, talk to your primary care provider, who can give you a referral to a cardiologist if necessary.



To take the heart disease risk assessment, visit [umcapitalregion.org/hvi](https://umcapitalregion.org/hvi).



## **IF YOU HAVE SYMPTOMS, DON'T WAIT!**

Call 911 immediately if you are experiencing symptoms of a heart attack. While symptoms may differ between women and men, they may include:

- Chest pain or discomfort
- Cold sweats
- Discomfort or pain in the arms, back, neck, jaw or upper stomach
- Lightheadedness
- Nausea and/or vomiting
- Shortness of breath



Help  
FOR THE  
LITTLEST

AN INNOVATIVE PROGRAM SETS UP NICU BABIES FOR A LIFETIME OF SUCCESS.

**BABIES COME TO THE NEONATAL INTENSIVE CARE UNIT (NICU)** at the University of Maryland Children's Hospital for many reasons. They may be born prematurely, need surgery soon after birth, have trouble breathing or need help for another reason.

Every baby placed in a Level 4 NICU requires highly specialized care and may be at risk of developmental delays. The Premature Infant Developmental Enrichment (PRIDE) program—an innovative, collaborative endeavor between the University of Maryland School of Medicine and the Baltimore City Infants and Toddlers Program—connects vulnerable infants to early intervention services that help them grow.

“PRIDE bridges the gap between NICU families and early intervention service providers,” said Brenda Hussey-Gardner, PhD, MPH, professor of pediatrics at the University of Maryland School of Medicine, director of Maryland's



Brenda Hussey-Gardner, PhD, MPH

PRIDE and co-director of University of Maryland Children's Hospital NICU Follow-Up Program. “I believe ours was the first program of its type in the country.”

### **PRIDE EXPLAINED**

PRIDE guides families through the early intervention process at no cost for families. The program is run by Dr. Hussey-Gardner and two service coordinators, Melanie Miller and Hayley Anthony, and supported by a large multidisciplinary team of specialists. One of these is Dina El Metwally, MD, PhD.

“We've been fortunate to have such an innovative program for more than 20 years,” said Dr. El Metwally, professor and

## GROWING THE VILLAGE

Because Anna Benshoof was 40 years old and pregnant with triplets, her pregnancy was high risk from day one. Her provider put her on bed rest, then required she stay at the hospital for ongoing monitoring.

At twenty-five weeks and four days, Benshoof was given an ultimatum: “Deliver today or die.” On Oct. 11, 2012, her triplets were born. Sadly, two—Theodore and Zachary—never made it home. On Feb. 4, 2013, Nicholas did, weighing 6 pounds 5 ounces and wearing a nasal canula for oxygen.

“I knew nothing about what babies should or shouldn’t be able to do,” Benshoof said. “I needed people to tell me what milestones he should be hitting and to help him hit them. That’s what PRIDE did.”

### AT YOUR SERVICE

Days after Nicholas’s homecoming, physical therapists came knocking. Occupational therapists weren’t far behind.

The therapists helped Nicholas grow stronger and develop fine motor skills. They also helped him learn to eat solid foods. Along the way, they taught Benshoof and her husband, Bruce, how

to help their young child. From Benshoof’s perspective, this education was vital to helping her son develop.

### BEYOND PRIDE

When Nicholas graduated from PRIDE in March 2016, he was walking, playing with toys and eating solid foods. Because he wasn’t speaking yet, Nicholas was transitioned to speech services through his local public school. Now in third grade, Nicholas talks all the time, especially about Harry Potter.

Impressed with the power of early intervention, Benshoof became a parent member of the State Interagency Coordinating Council and parent member and co-chair of the Baltimore City Interagency Coordinating Council. In these roles, Benshoof educates parents about the need for and availability of early intervention services.

She encourages parents to reach out for help. After all, she said, “It takes a village to raise a kid.”

Though PRIDE is unique, Dr. Hussey-Gardner hopes to change that. For nearly two decades, she has presented on PRIDE at medical conferences and described its benefits in journal articles. She’s given talks across the country and even overseas to help encourage the creation of similar programs.

As a result, hospitals around the world are given tools to improve their early intervention processes, and more children are getting a solid start to life. All because of a little PRIDE in Maryland.



Dina El Metwally, MD, PhD

chief of the Division of Neonatology in the Department of Pediatrics at the University of Maryland School of Medicine. “We truly want the best for all our babies, and this program provides the best start imaginable.”

Entrance into PRIDE starts with a development evaluation, which is led by Dr. Hussey-Gardner, who works with other specialists to determine a child’s needs. Miller and Anthony monitor the

child’s development, prepare the family for any potential future challenges and advocate for parents and children alike.

### PROUD OF THE RESULTS

For NICU families, PRIDE streamlines access to the help they need when they need it most.

According to a decade of data, PRIDE does its job well. Parents who utilize PRIDE start important intervention services earlier. They’re also more likely to stay with it. This may be a result of the early relationship parents establish with Miller and Anthony, as well as their ongoing attendance at the University of Maryland NICU Follow-Up Program.

“The most gratifying part of PRIDE is helping parents at such a vulnerable time,” Dr. Hussey-Gardner said. “Letting them know there’s a great system of early intervention services to help their baby develop and learn—and then helping to streamline that process for them—is extremely rewarding for us.”



To learn more about Maryland’s PRIDE at University of Maryland Children’s Hospital, visit [umm.edu/PRIDE](http://umm.edu/PRIDE). To refer a child for early intervention services, visit [referral.mditp.org](http://referral.mditp.org).

## A NEW EXPERIENCE

It was Carmella Williams's fourth pregnancy, and all was well—until her March 5, 2020, delivery. Then, her blood pressure dropped. Her unborn baby's heart rate plummeted along with it, dictating an emergency C-section.

For 28 minutes after her birth, baby Aleshia's oxygen level was at 80%. The lack of oxygen caused hypoxic ischemic encephalopathy, a condition that can result in severe developmental delays.

"I was confused," Williams said. "Aleshia was born full-term, so I couldn't wrap my head around what was going on."

### TO THE NICU

Specialists in the NICU at University of Maryland Children's Hospital helped Aleshia thrive. During Aleshia's second and final week there, Williams met Aleshia's service coordinator, Hayley Anthony.

When Williams had questions, Anthony

provided answers. Anthony also attended follow-up NICU appointments with Williams and made sure Aleshia's at-home care ran smoothly.

With moderate to severe hearing loss, Aleshia needed intervention from day one. Anthony and Maryland's PRIDE made sure she got it.

### HELP AT HOME

"Aleshia is the youngest of my four children, and I've never needed these extra services," Williams said. "I wouldn't have known where to begin without PRIDE."

One of the main services PRIDE provided was speech therapy. Now, Aleshia knows sign language. She can hear well when wearing her hearing aids, and she loves singing at the top of her lungs.

"If I had to do all this on my own, it would have been a nightmare," Williams said. "Maryland's PRIDE really takes down the stress level that all NICU parents experience."



# Delivering Babies CLOSE TO HOME

**OUR LABOR AND** delivery unit is staffed around the clock by pediatricians and supported by a neonatologist specializing in the medical care of newborns and infants. Our physicians and highly skilled nursing staff provide lifesaving care for newborns. UM Capital Region Health services and resources include:

- Experienced medical staff for urgent, critical obstetric care
- Specialized equipment to handle extraordinary circumstances during delivery
- The ability to care for the most vulnerable and sick newborns
- Advanced care for women who develop special needs during their pregnancy

Parents are welcome in the nursery and encouraged to

stay involved in their baby's care and can be assured that their baby is receiving the utmost care and attention.

"I take great pride in leading women's health services at UM Capital Region Health," said Kerry Lewis, MD, FACOG, medical director, Obstetrics and Gynecology, Maternal Fetal Medicine, Women's Health and Specialty Program. "We strive to provide superior care for all our patients, but we recognize that babies with special needs can be a scary experience. Our providers are prepared to look after both mother and baby until they are ready to go home safely."



Learn more about UM Capital's Obstetrics and Pregnancy services by visiting [umcapitalregion.org/newborns](https://umcapitalregion.org/newborns).

# SAFE SLEEP

## for Infants

HOW AND WHERE YOUR BABY SLEEPS MATTERS. EVERY YEAR, 3,400 BABIES IN THE U.S. DIE WHILE SLEEPING FROM UNEXPECTED INFANT DEATH. REDUCE THAT RISK BY FOLLOWING THESE SAFE SLEEP HABITS.

### 4 STEPS FOR SAFER SLEEP

1

**Place your baby on his/her back.** Babies who sleep in this position are less likely to die of sudden infant death syndrome than babies who sleep on their sides or stomachs.

2

**Allow nothing in the crib with your baby.** Remove all items, especially soft pillows, blankets, baby bumpers and stuffed toys, so your baby can't accidentally roll onto them and block airflow.

3

**Give your baby a firm sleep surface.** A crib should meet Consumer Product Safety Commission standards. Do not let babies fall asleep on a couch, pillow or anyone's abdomen.

4

**Don't bed-share with baby.** It's OK to keep your baby's crib in your room, but don't sleep in the same bed with your baby.



Want more safe sleep tips? To find a pediatrician near you, visit [umms.org/find-a-doctor](https://umms.org/find-a-doctor).



# Welcome

# NEW PROVIDERS



## MARISSA BONYUN, MD

*Orthopedic Surgeon, UM Capital Region Medical Group*

Dr. Bonyun's clinical focus includes both orthopaedic trauma and revision arthroplasty, with a commitment to teaching, assessment and curriculum design.

Dr. Bonyun attended medical school and completed her orthopaedic surgery residency at the University of Toronto. She completed her first fellowship in complex lower extremity reconstruction at Mount Sinai Hospital in Toronto, followed by an orthopaedic trauma fellowship at the R Adams Cowley Shock Trauma Center at the University of Maryland Medical Center in Baltimore.

Dr. Bonyun operates at UM Capital Region Medical Center and UM Laurel Medical Center and sees patients at UM Capital Region Medical Center. She also operates on and sees patients at other locations throughout the University of Maryland Medical System.



## NATHANAEL DAYES, MD

*Vascular Surgeon, UM Capital Region Medical Group*

Dr. Dayes is an experienced vascular surgeon and an active Fellow of the Society for Vascular Surgery.

Dr. Dayes attended medical school at the Weill Cornell Medical College at Cornell University. He trained at SUNY Downstate Health Sciences University for his general surgery residency and then completed a fellowship in vascular surgery at the University of Maryland Medical Center.

Dr. Dayes sees patients at UM Capital Region Health Medical Group's offices in Bowie, Largo and Laurel.



## CLARENCE FINDLEY, MD, PHD, FACC, FSCAI

*Coronary and Structural Heart Disease Specialist, UM Capital Region Health*

Dr. Findley offers his patients minimally invasive techniques to repair structural heart defects. Working with community cardiologists and interventional cardiologists, he brings compassionate, evidence-based and quality heart care to the residents of Prince George's County and southern Maryland.

Dr. Findley attended medical school at Duke University School of Medicine then trained at Massachusetts General Hospital for his internal medicine residency. He completed cardiovascular disease, interventional cardiology and structural heart disease fellowships at Stanford University, the University of Missouri – Kansas City School of Medicine and Baylor Scott & White The Heart Hospital – Plano, respectively.

Dr. Findley sees patients at UM Capital Region Medical Center in Largo.

# UPCOMING COMMUNITY HEALTH PROGRAMS & EVENTS

## VIRTUAL MENTAL HEALTH FIRST AID TRAINING

Just as CPR helps you assist an individual having a heart attack, **Mental Health First Aid** helps you assist someone experiencing a mental health or substance use-related crisis. Through this course, you learn risk factors and warning signs for mental health and addiction concerns, strategies for how to help someone in both crisis and non-crisis situations, and where to turn for help. Registration is required. Space is limited.

- Youth Part 1: **Thursday, Jul. 14, 9am-noon**
- Youth Part 2: **Friday, Jul. 15, 9am-noon**
- Adult One-Day Training: **Saturday, Sept. 17, 9am-3pm**
- Youth One-Day Training: **Saturday, Nov. 12, 9am-3pm**

For additional information or to register for an upcoming class, call **240-677-1062** or email [umcapitalcommunityhealth@umm.edu](mailto:umcapitalcommunityhealth@umm.edu). For sessions with two-day trainings, you must attend Parts 1 and 2 to receive certification.

## DINE, LEARN & MOVE GOES VIRTUAL

Join us each month for 90 minutes of virtual fun. Get active, learn simple everyday tips for making healthy choices and engage with a chef while watching a cooking demonstration. **Dine, Learn & Move** is FREE and presented in partnership with Prince George's County Health Department, Suburban Hospital and Maryland-National Capital Park and Planning Commission, Department of Parks and Recreation, Prince George's County. All ages are welcome. All sessions meet from 6pm to 7:30pm.

- **Wednesday, Jun. 22**
- **Wednesday, Aug. 24**
- **Wednesday, Jul. 27**
- **Wednesday, Sept. 28**

For more information, visit [wellness.pgparcs.com](http://wellness.pgparcs.com), email [wellness@pgparcs.com](mailto:wellness@pgparcs.com), or call **301-446-6833**; TTY **301-699-2544**. To register to attend this program, please email [wellnessinfo@co.pg.md.us](mailto:wellnessinfo@co.pg.md.us).

## UM CAPITAL REGION

### DIABETES PREVENTION PROGRAM (DPP)

Are you thinking about making healthy changes to prevent Type 2 diabetes? The **National Diabetes Prevention Program**, recognized by the Centers for Disease Control and Prevention, can help you build healthy habits that last a lifetime. When you join our lifestyle change program, you'll learn, laugh, share stories, try new things and build new habits—all while lowering your risk of Type 2 diabetes and improving your health. For more information regarding the National Diabetes Prevention Program, visit [cdc.gov/diabetes/prevention](http://cdc.gov/diabetes/prevention). Space is limited. Participants will be accepted on a first come, first served basis.

- **Program meets weekly, starting Thursday, Jun. 9, 6pm-7pm**

To discuss eligibility requirements and register for UM Capital Region Health's upcoming diabetes prevention class, please call **240-677-1062** or email [umcapitalcommunityhealth@umm.edu](mailto:umcapitalcommunityhealth@umm.edu).

## MAMA & BABY MOBILE HEALTH UNIT

Our mobile health unit is provided through a partnership with the March of Dimes and UM Capital and is specifically designed to help uninsured and underinsured women throughout Prince George's County receive quality health care for themselves and their babies. We see women of childbearing age and pregnant women. The unit is equipped with two private exam rooms and staffed by an experienced team of certified nurse midwives.

- **By appointment only**

Please call **301-437-5788**, Monday-Friday from 9am to 4pm to schedule an appointment.





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- Peripheral Artery Disease (PAD)
- Stroke Awareness



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