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PLUS Joanna Gaines

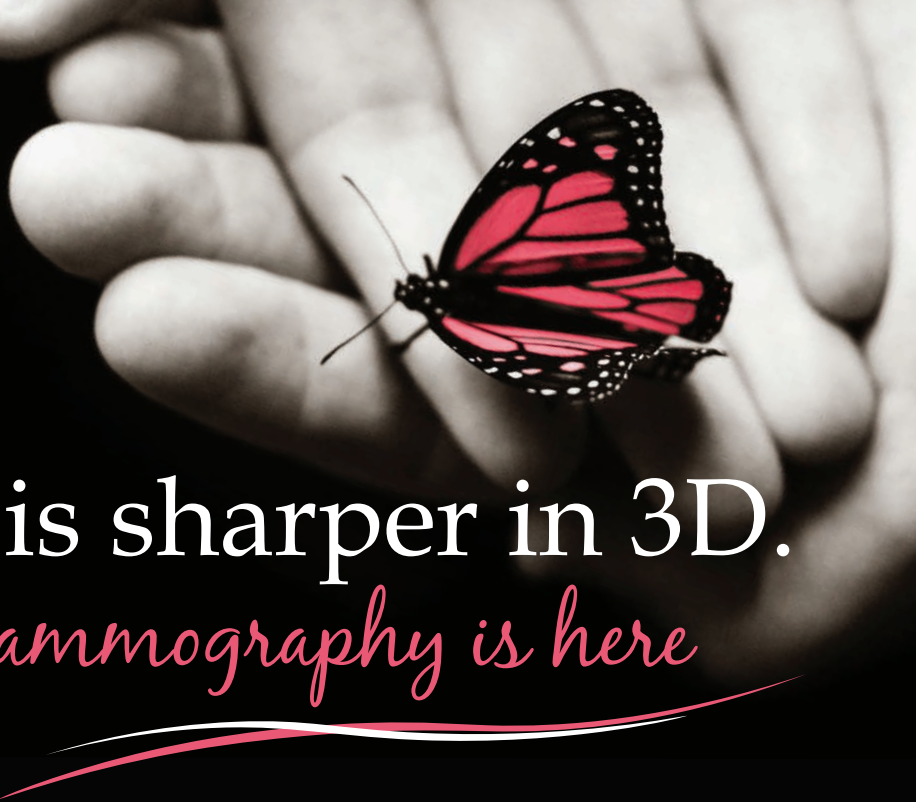
welcomed a new baby
to her family after her
40th birthday

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OUR TINIEST
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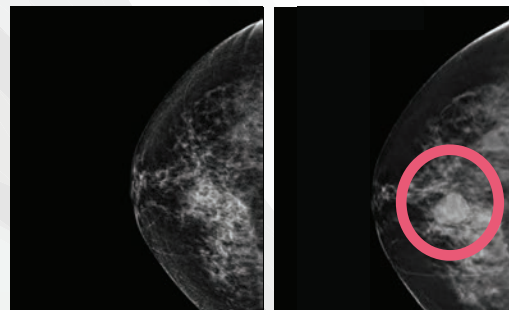
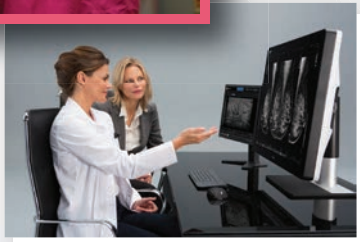
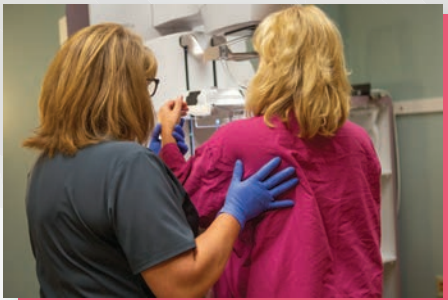
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Rules are made to be broken.
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Quick Care, When You Need It

MGH Express Urgent Care offers continuity in care.

SPRINGING FORWARD

Marion General Hospital continues to offer comprehensive care for patients of all generations



With all the excitement and anticipation spring brings, I find myself reflecting upon the significant and progressive steps Marion General Hospital took this past fall and winter. We continue to strive to provide the most comprehensive medical services possible to our patient base. These recent steps premiered new and far-reaching services that span all generations of our patient population.

Those services are featured in this publication. You can read more about our 3D mammography (page 5). Our neonatology services help babies get healthy beginnings (page 49). When patients need non-emergency care quickly, they can turn to urgent care at MGH Express (page 52). MGH has once again earned Chest Pain Accreditation for our staff's ability to evaluate, diagnose and treat patients who may be experiencing a heart attack (page 54). Finally, our PACT team cares for those leaving the hospital (page 55).

I am proud of what has become and continues to be the norm for the MGH medical practitioners and the hospital staff as they not only embrace and promote these improvements and expansions, but continue their daily dedication to providing the highest level of quality care for our patients and families.

Stephanie Hilton-Siebert
President/CEO
Marion General Hospital



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Vim & Vigor™, Spring 2019, Volume 35, Number 1, is published three times a year by MANIFEST LLC, 4110 N. Scottsdale Road, Suite 315, Scottsdale, AZ 85251, 602-395-5850. Vim & Vigor™ is published for the purpose of disseminating health-related information for the well-being of the general public and its subscribers. The information contained in Vim & Vigor™ is not intended for the purpose of diagnosing or prescribing. Please consult your physician before undertaking any form of medical treatment and/or adopting any exercise program or dietary guidelines. Vim & Vigor™ does not accept advertising promoting the consumption of alcohol or tobacco. Copyright © 2019 by MANIFEST LLC. All rights reserved. Subscriptions in U.S.: \$3 for one year (3 issues). Single copies: \$2.95. For subscriptions, write: Circulation Manager, Vim & Vigor™, 4110 N. Scottsdale Road, Suite 315, Scottsdale, AZ 85251.



MGH WELCOMES NEW PRACTITIONERS



Michella Azar, MD, earned her medical degree at American University of Beirut, Lebanon. She completed her internal medicine residency at Indiana University, Indianapolis. She joins the talented practitioners and staff at Family Medicine Center-South in the South Marion Medical Building, located at 1406 W. Bella Drive in Marion, Indiana.



Kristy Colyer, NP-C, earned her family nurse practitioner, Master of Science in nursing from Ball State University, Muncie, Indiana. She earned her bachelor's degree in nursing from Indiana University Kokomo. She is board-certified by the American Academy of Nurse Practitioners. She joins the talented practitioners and staff at Marion Family Practice, located at 1391 N. Baldwin Ave., Marion.



Anne Campbell, AGPCNP-C (adult-gerontology primary care nurse practitioner, certified), earned her Master of Science in nursing from Indiana University School of Nursing, Indianapolis. She earned her Bachelor of Science in nursing from Ball State University, Muncie, Indiana. She is board-certified by the American Academy of Nurse Practitioners. She will join the talented practitioners and staff at Upland Health & Diagnostics, 1809 S. Main St., Upland, Indiana.



Stephan Keller, MD, earned his medical degree at Indiana University School of Medicine, Indianapolis. He completed his residency at Carolinas Medical Center Emergency Medicine, Charlotte, North Carolina. He is board-certified in emergency medicine. He officially began his new duties as medical director of Emergency and Urgent Care Services in October 2018. ■

STAFF CERTIFICATIONS

MGH employees advance knowledge to provide quality patient-centered care



Three Marion General Hospital employees have proved their dedication to providing our community with the highest level of quality healthcare. This dedication is demonstrated by their commitment to study for and pass a professional examination to become certified, furthering their education and advancing their knowledge within their chosen professions.

In healthcare, professional certification helps ensure excellence. MGH staff members pursue this with enthusiasm.

Riley Rose, AGACNP-BC/CWCN-AP, nurse practitioner at MGH Family Medicine Center–South, holds the certification of adult-gerontology acute care nurse practitioner, and has received recertification from the American Nurses Credentialing Center. He also holds the certification of wound care nurse, advanced practice, from the Wound, Ostomy and Continence Nursing Certification Board. Rose received his Master of Science in nursing from Indiana University and his wound care nurse certification from Cleveland Clinic School of Wound Ostomy Continence. A 15-year MGH employee, he is married and has four children. He enjoys fishing and attending sporting events.

Damon Moorman, CTR, medical oncology, is now a certified tumor registrar from the National Cancer Registrars Association. Moorman received his bachelor's degree in management from Taylor University, Upland, Indiana. His interests include

being concert promoter at Epworth United Methodist Church in Matthews, Indiana. An MGH employee for nine years, Moorman says “the Cancer Center is a great working environment with a family atmosphere.”

Cody Grimme, RN-CEN, emergency department, is now certified by the

Board of Certification for Emergency Nursing. He earned his associate's degree in nursing from Ivy Tech Community College. A two-year MGH employee, his hobbies and interests include hunting, fishing, shooting, horseback riding and the outdoors. His family includes his mother, Paula, father, Randy, and sister, Brittany. Grimme enjoys working at MGH because “the teamwork of direct patient core staff is amazing. As an ER nurse, we touch lives every day, on some people's worst day. We make a difference more than we know,” he says. ■



**Riley Rose, AGACNP-BC/
CWCN-AP**



Damon Moorman, CTR



Cody Grimme, RN-CEN

SLEEP SERVICES ACCREDITATION



ACHC
ACCREDITED

Marion General Hospital proudly announces its approval of accreditation status by Accreditation Commission for Health Care for sleep services.

Accreditation is the gold standard by which the medical community and the public can evaluate sleep medicine services. “Accreditation inspires a high level of confidence for our patients and referring physicians,” states Tom Oney, MGH's director of Ancillary & Support Services. “This is an important step that represents the hospital's continued commitment to providing the highest level of care to our patients. We are extremely proud of this achievement and the tremendous effort on the part of the staff that made this major accomplishment.”

The MGH Sleep Lab is located at the Northwood Medical Center at 1387 N. Baldwin Ave. It specializes in the diagnosis and treatment of sleep disorders, including snoring, sleep apnea, insomnia, restless leg syndrome and others. Sleep testing can also be arranged in the home setting and is offered during daytime hours at the lab if appropriate.

MGH INVESTS IN THE BREAKTHROUGH MAMMOGRAPHY TECHNOLOGY

A new breast screening experience is here



Did you know that 1 in 4 women avoid mammograms because of worry and fear?

Pain and anxiety are the primary reasons women don't get regular mammograms. Yet 99 percent of women will survive breast cancer if it's detected early enough.

Marion General Hospital has once again invested in the latest and most advanced technology to better serve the healthcare needs of Grant County residents. The radiology department is pleased to provide 3D mammography to patients.

"Our ultimate goal is to be a 3D mammography facility," Tom Oney, administrative director for MGH's Ancillary & Support Services, says. "It's a big investment for the hospital." New 3D technology can pinpoint breast cancer better than a standard mammogram. It reveals breast cancers that couldn't be seen before, and offers physicians and radiologists almost endless diagnostic possibilities.

A new, inviting mammography system promotes a sense of calm, with elegant lighting and gentle, rounded shapes. It was built with one objective in mind: to ease your anxiety from the moment you enter the exam room. A soft-curved surface invites patients into a space of comfort and support. Those benefits factored into MGH's purchasing decision.

Never has a mammography system put you in a better position for a more relaxing experience and effective care.

MGH believes a woman should not fear a test that could save her life. ■



MGH has invested in the latest mammography technology.

Ask if 3D Mammography is Right for You
(765) 660-6222
Financial assistance available to those who qualify

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Everything is sharper in 3D.
3D Mammography is here



UNCOMMON KINDNESS

A message from MGH Auxiliary President Kelly Snyder



Kelly Snyder

Every time a volunteer arrives for their shift, they have an opportunity to show uncommon kindness—a kind word to someone having a bad day, a word of encouragement to someone

anxious about having surgery, a congratulations to a family receiving a new baby, a smile to an employee who has worked extra hours and is very tired ... Every day gives us a chance to make a difference in someone else's life.

Our hospital auxiliary has been in full force since September and we have several new board members: Janice Hanes,

Bill Beck, Donna Knight and Malinda Wyatt. We also have a year packed full of fundraisers planned. Some include old faithfuls, such as Rise n' Roll, Collective Goods and South Bend Chocolates, but we hope to add newcomers to our agenda. All fundraisers are open to the public and are published in the newspaper and on Facebook. Please join us! We are always open for suggestions on fundraisers. If you have suggestions for a fundraiser that you feel would benefit MGH, please give me a call at **765-661-2560**.

This past September, MGH hosted the Indiana

GIVE 

Join Our Team

To learn more about the many volunteer opportunities available at MGH, call Sheila Stewart at **765-660-6410**.

Hospital Auxiliary Association (IHAA) Eastern Area meeting. Six hospitals were represented with over 50 attendees. Each hospital auxiliary had the opportunity to share what their hospital had achieved over the past several months. A fun time was had by all. We enjoyed delicious food by Peace and Plenty Catering and cakes donated by our local Café Valley Bakery.

In December, MGH held its annual Lights of Love Celebration, a brilliant display of lights that has become a mainstay of the community holiday celebration. This is a wonderful time to show one's love and admiration of others by purchasing a light in their honor. The celebration includes a tree-lighting ceremony, followed by refreshments and music.

Now that the holidays are past, we begin a new year ... and with this, MGH hopes your year is full of joy and happiness. ■



The annual Lights of Love Celebration includes a tree-lighting ceremony, a time to honor loved ones.

MGH MEMORIAL GARDEN

Honoring former MGH employees, physicians and volunteers

► The Marion General Hospital Memorial Garden, in the courtyard west of the cafeteria, was built in memory of former Plant Engineering Supervisor Fred Gause and made possible by a generous donation and support from the MGH Auxiliary. The garden honors MGH employees, physicians and volunteers who have died by displaying their names and departments on engraved bricks set around the base of a tranquil fountain. Honored at press time was: **Judith Kay Dennison**, nursing.

GIVE 

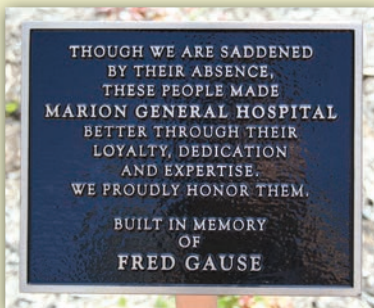
Purchase a Memorial Brick

Bricks to honor MGH employees, physicians and volunteers who have died can be purchased for a minimum of \$50. Call Volunteer Services at **765-660-6410** for more information.

MARION GENERAL HOSPITAL ENDOWMENT FUND

In 1994, the Marion General Hospital Endowment Fund was started to accept donations to support the hospital's mission and vision for our Healthcare Community. Donations to the fund are sincerely appreciated. Call 765-662-0065 or mail to:

**The Marion General Hospital Endowment Fund
Community Foundation of Grant County, Indiana Inc.
505 W. Third St.
Marion, IN 46952**



Dorinda Turner, MGH Auxiliary Board Member, addresses Memorial Garden supporters during a ceremony held during National Hospital Week. In 2018, 155 people were honored.



LEARN MORE ABOUT LUNG HEALTH



Richard Goodstein, DO, FCCP, FACP, Lung Center of MGH

Q If someone has been a long-time smoker, what are the benefits to quitting?

No matter when you stop, quitting reduces mortality and increases the likelihood of a better therapeutic response. Further cigarette smoking is associated with increased cancer risk and cardiovascular disease, including heart attacks and strokes. Thus these risks are further reduced and therapy of existing disease has a greater likelihood of improvement.

Q What are the main reasons you see patients in the pulmonary rehab clinic?

Most of the patients are suffering from chronic obstructive pulmonary disease (COPD). Our goals are to reduce their symptoms, and improve exercise tolerance, thus enabling them to more fully participate and enjoy their lives. Studies clearly demonstrate prolonged survivorship and an improved quality of life after rehab. In addition, rehab provides patients education on their disease and how they and their physicians can make an impact and a better therapeutic team. Many of our patients frankly would otherwise be sedentary, at home with limited socialization. I strongly believe rehab decreases depression and provides reintroduction of socialization. Finally, by meeting others, our patients realize they are not alone, they are not lepers, so to speak, but are people like each of us with a medical issue that can be helped.

Q How does secondhand smoke affect a nonsmoker's lung health?

Exactly as firsthand smoke, by causing inflammation of the airways.

Q What are the connections with asthma and tobacco use?

Studies demonstrate that a mother who smokes is more likely to affect the lung health of her child, including a higher incidence of asthma. A child in the home of parents who smoke has a far higher likelihood of asthma, sinus disease and ear problems. Asthmatics exposed secondhand to cigarettes have a greater level of airway inflammation, worse pulmonary functions, increased likelihood of admissions and generally a far greater need for medication, including corticosteroids. Children with asthma in homes of smokers have a greater risk of *status asthmaticus* (a severe form of asthma attack), which can be fatal.

Q It has been found that e-cigarettes have significant amounts of tobacco in them. What are your thoughts on e-cigarettes?

I view them the same as I do tobacco. Further, I would not at all be surprised to see e-cigarette users ultimately converting to tobacco; although currently I am unaware of studies that show this. In my mind, it is the habit that becomes the problem, the psychological or behavioral dependence that becomes ingrained or perpetuated. ■

WEBSITE



Ready to Quit?

Call the Indiana Tobacco Quitline at **1-800-QUIT-NOW (1-800-784-8669)**. Or visit their website at www.in.gov/quitline.



There are several reasons for the increase. A study published in the *International Journal of Healthcare* reported the reason most commonly cited by women for delaying childbearing was “being able to financially support a child,” which often correlates with waiting to complete college and establish a career. Women who participated in the study also mentioned waiting to be in a stable relationship, finding the right partner and having a home as other top reasons for waiting to have kids into their 30s and 40s.

Another reason women may be taking more time is because they can, or at least they think they can. While Gaines says she conceived naturally—Chip, in a tweet, attributed the pregnancy to a romantic date night—many 40-somethings are relying on assisted reproductive technology, even if they’re not talking about it. It’s empowering to have options, but experts warn against putting too much stock in technology.

“I do think, based on what we’re seeing on social media about women having children later in life, there is a bit of a false sense of security thinking you

can delay childbearing indefinitely,” says Shannon Clark, MD, a spokeswoman for the American College of Obstetricians and Gynecologists. “And women may not necessarily recognize that it’s not always easy.”

Fertility After 40

As evidenced by Gaines, women can—and do—get pregnant naturally after age 40, but it’s much more difficult. While a 30-year-old woman has about a 20 percent chance of conceiving each month, the chances drop to 5 percent 10 years later, according to the American

Society for Reproductive Medicine. The decline is attributable to both egg quantity and quality.

“Even though women are born with more eggs in their ovaries than they will ever ovulate, most of these eggs are lost without ever maturing and being released,” says Christos Coutifaris, MD, PhD, president of the American Society for Reproductive Medicine. “The other thing you have to remember is these eggs have been sitting in the ovaries since the woman was a fetus. Over time, the quality of the eggs decreases, resulting in chromosomal abnormalities or genetic defects that raise the risk of failed implantation and miscarriage.”

And conception is only half the battle. After 40, women are more likely to experience pregnancy-related complications.

CONSIDER CONTRACEPTION

Joanna Gaines was thrilled to have a baby at age 40 and even told *People* magazine she’s open to having more.

But not all women over 40 want to start or expand their families. And while the odds of conceiving naturally after 40 are lower than they were in your 20s and 30s, it can happen unexpectedly.

“I know many women who thought, oh, I’m 41. There’s no way I can get pregnant,” says American College of Obstetricians and Gynecologists spokeswoman Shannon Clark, MD. “And then they get pregnant. It happens.”

The bottom line is, if you do not want to get pregnant and you still have periods, talk to your provider about what you can do to prevent pregnancy.

► Birth control pills can safely be used until age 50 as long as you have normal blood pressure levels, have no indication of heart disease and don’t smoke.

► Permanent birth control, such as tubal ligation or the nonsurgical placement of a permanent barrier, is the most common form of contraception in women over 35.

► Barrier methods, including condoms and diaphragms, are always available but aren’t as effective as the other options.

CALL



Have Questions About Getting Pregnant?

Are you ready to start a family? For more information or to schedule an appointment with Marion General Hospital’s Obstetrics & Gynecology, please call **765-660-7580**.

of Radiology Lung Cancer Screening Committee and ACR Thoracic Imaging Panel.

Lung cancer screening is recommended for those considered at high risk for the disease—those who are 55 to 80 years old, still smoke or have quit within the last 15 years, and have a 30-pack-year history of smoking (one pack a day for 30 years, or two packs a day for 15 years, and so on). But Kazerooni notes there is ongoing discussion in the medical community and research exploring the potential benefits of screening based on other risk factors.

After all, while smoking is a major contributor to lung cancer, it's not the only one. Other factors that can put you at risk for the disease include:

- **Radon gas.** This naturally occurring gas is harmless in small amounts, but when it becomes concentrated, it can pose a risk. You can hire a professional to test for radon in your home, or you can purchase an inexpensive kit to do it yourself. According to the U.S. Department of Health and Human Services, 1 in 15 homes has a high radon level. If you find you have high radon levels in your home, you can install a vent system or fan to pull the gas out.

- **Secondhand smoke.** If you're frequently around others who smoke, you may be putting yourself at risk. In fact, nonsmokers who are regularly exposed to secondhand smoke have a 20 to 30 percent greater chance of developing lung cancer. In those who have never smoked but breathed secondhand smoke as a child, lung cancer is more common as well.

- **Exposure to cancer-causing materials.** Asbestos, which is a concern for those who work in certain industries like shipbuilding and insulation, and diesel exhaust, which we can inhale at work or while traveling, are agents that can cause lung cancer. To help lower your risk, wear a protective respirator to filter the air you breathe. In addition, try to reduce your exposure by limiting the time you spend near idling machines.

- **Air pollution.** In the U.S., the risk of lung cancer as a result of air pollution is lower than in many other countries, but people should still beware of indoor and outdoor air pollution. To limit your exposure, watch for the air quality index in your area and avoid outdoor activity when pollution is at high levels. Take your walks or runs along lower-trafficked routes, and keep your windows closed during rush hour. An air purifier inside your home can help, too.

- **Genetics.** A family history of lung cancer may increase your risk, regardless of whether you ever smoked.

WARNING SIGNS TO WATCH FOR

Be sure to talk to your doctor about any of your risk factors and concerns. It's also important to know the warning signs. Without a standardized screening, your ability to identify changes in your body and see a healthcare provider is essential to identifying lung cancer early. Those symptoms include: a cough that doesn't go away and worsens over time, hoarseness, constant chest pain, shortness of breath, regular lung infections and coughing up blood.

If you experience these symptoms, talk to your doctor. He or she will recommend tests to look for any signs of

lung cancer or other conditions that might be causing your symptoms. Note that the early symptoms of lung cancer are subtle—if they are present at all—and can indicate something else.

Cooke says it's important to change the way we think about lung cancer to help people get the care they need, whether they smoke or not.

"Lung cancer is considered a lifestyle disease versus a disease of bad luck. But most cancers are bad luck, and most smokers don't get lung cancer," he says.

Of course, smokers don't deserve lung cancer, either. "But there's stigma with lung cancer," Cooke says, "and we need to stop that." ■

CALL



Need Help to Quit Smoking?

Ready to kick the habit? There are resources that can help. Call the Indiana Tobacco Quitline at **1-800-QUIT-NOW (1-800-784-8669)**. Or visit their website at www.in.gov/quitline.

Who Is a Candidate for Lung Cancer Screening?

Researchers understand that lung cancer screenings come with benefits and risks. Making recommendations about who should be screened and when is about maximizing benefits and minimizing potential harms. Researchers have found that those who should be screened for lung cancer meet the following criteria:

- ▶ Are age 55 to 80
- ▶ Have a 30-pack-year history of smoking (meaning one pack a day for 30 years, or two packs a day for 15 years, and so on)
- ▶ Are current smokers or have quit within the last 15 years

"The National Lung Trial studied that type of smoker," says Ella Kazerooni, MD, chair of the American College of Radiology Lung Cancer Screening Committee, "and showed that if you screen once a year for three years, you can reduce the risk of dying from lung cancer by 20 percent."

With intervals, “in addition to increasing your heart rate, you’re stressing your muscles in a different way where you’re also building muscle,” Kumar says.

Spend the rest of your workout doing strength-training exercises that target big muscle groups, like holding a plank pose to work your core or doing squats to work your quads.

YOU CAN'T OUTFIT (OR OUTFIT) A BAD DIET

Although it can be tempting to think that the gym is a silver bullet for weight loss, exercise alone isn't enough to shed pounds.

“By doing only physical activity, you don't lose very much weight,” Fitch says. “You've got to combine exercise with some dietary changes in order to produce results.”

So, start keeping tabs on what—and how much—you're eating with a calorie tracker. Then, once you see what you're eating, you can cut back on calories and start making more healthful food choices (e.g., drinking sparkling water instead of soda or eating spaghetti squash instead of pasta).

Calorie trackers can also include a log of your exercise and help keep you from overestimating the calories you burn when you're working out. It might show you, for example, that a half-hour workout is quickly negated by a single-serving bag of potato chips, Fitch says. ■

BENEFITS BEYOND THE SCALE

If you add cardio and strength training to your exercise regimen and still don't see a change on the scale, fear not.

You may be losing fat and adding more lean muscle mass, which doesn't necessarily translate to pounds lost but does mean you're getting fitter. So, try looking at other results, from how your clothes fit to your body fat percentage or waist size.

Plus, keep in mind that losing weight isn't the only reason to work out.

“The bigger benefit of exercise is that it's good for a whole lot of other things,” from reducing your risk for cardiovascular disease and high blood pressure to lowering stress levels and elevating your mood, says Scott Kahan, MD, chair of the Clinical Committee of the Obesity Society.

Just make sure you choose an exercise that you enjoy, he says.

So, before trekking to the treadmill with a grimace, find an activity that works for you, whether that's power lifting, hiking or swimming.

“If you don't like going to the gym, but you like playing basketball,” Dr. Kahan says, “go outside and play some basketball.”

CALL



Learn About Your Heart

Marion General Hospital offers cardiac rehabilitation programs and education classes for patients with cardiac issues. For more information about cardiac education classes, call MGH at **765-660-6050**.



Healthy Beginnings

MGH now offers neonatology services dedicated to treating, and ultimately preventing, complications of premature birth BY **TERRI COUSE**

Sometimes life throws you a curve, something unexpected. While most babies are born full-term and healthy, some babies just can't wait, and others need some help getting started. For these moments, Marion General Hospital is proud to expand pediatric services to include neonatology, bringing together nurturing, developmental care for babies in a soothing, family-centered environment. We appreciate that you trust us to care for your infant when they need that extra-special care.

In past years, infants born before 32 weeks or at less than 1,500 grams would be transferred

to Indianapolis or Fort Wayne. Infants with mild respiratory disease would also be transferred for higher levels of care. Now this care can be offered at MGH under the direct care of the neonatologists that would care for them in the higher level centers. The parents can stay local while their children grow and get stronger in the Special Care Nursery instead of needing to travel for sometimes a month or more.

Special Care for Infants

“Our group will be available to all deliveries, rounding on all healthy and sick newborns,” says James Cameron, MD, of Northern Indiana Neonatal Associates. “We can manage infants with infections, immature lungs, infants born to mothers on MAT (medication-assisted treatment for women with substance abuse disorders), infants born early or too small. These problems can be as minor as low blood sugar after delivery to more serious complications such as

problems with the heart being made incorrectly. About 10 percent of all infants require assistance in a special care nursery after delivery,” he says.

Medical research and education, empowered by skill and technology, bolster our neonatology program and Family Birthing Center staff as mother/baby specialists, partnering with parents, ensure that every newborn is cared for with skill and compassion. “Our board-certified neonatologists oversee the care for each baby born here at MGH along with providing the specialized care needed to oversee babies in the Special Care Nursery,” states Gail Elbert, administrative director of Maternal/Child/Great Beginnings.

MGH is proud to be able to provide babies with cutting-edge interventions, exceptional care and, in turn, remarkable outcomes. Neonatologists are known for their innovative approach in caring for the sickest newborns. Utilizing neonatologists allows the expectant mother to have peace of mind that her child will receive the very best possible care and permits the mother and her baby to remain in close proximity after delivery.



MEET THE NEONATOLOGISTS



Rene Arcellana, MD

Dr. Arcellana received his undergraduate degree and medical school training at the University of Santo Tomas in Manila, Philippines. His general pediatric training was completed at Jersey

Shore Medical Center in Neptune, New Jersey. He completed his fellowship in neonatal-perinatal medicine at the University of Louisville.



Daniel Biehl, MD

Dr. Biehl graduated from Michigan Tech University in Houghton, Michigan, and Wayne State University School of Medicine in Detroit. He completed his residency in general

pediatrics at Michigan State University and his fellowship in neonatal-perinatal medicine at the University of Louisville.



James Cameron, MD

Dr. Cameron graduated from Indiana University-Purdue University Fort Wayne and the Indiana University School of Medicine. He completed a residency in pediatrics at Wake

Forest University in Winston-Salem, North Carolina, and a fellowship in neonatal-perinatal medicine at Cincinnati Children's Hospital.

“The parents are kept up to date on their infant’s status,” Dr. Cameron says. “And because the care is offered locally, parents can stay at their home, so they can be close to their baby but still be in a familiar environment.”

A Range of Techniques

MGH also employs techniques such as skin-to-skin contact in caring for infants. Skin-to-skin contact between a baby and parents has been proven to decrease the length of stay, to promote bonding and to encourage breastfeeding.

We would like to think all babies come into this world easily and without difficulty. Unfortunately, that is not always the case. Prematurity alone accounts for approximately 1 of every 10 births in the United States. Preterm birth interrupts the process of fetal maturation, forcing critical growth and development to continue outside of the womb.

“We are so excited to offer this needed service here at MGH. Our neonatologists will see every baby, provide family-focused care and take care of our sickest babies. They are happy to address any issues or concerns,” says Elbert. ■

Congenital Intestinal Malrotation

By Mary Rasor

I am not your typical mother. I am a grieving mother who lost her child at 1 month of age. A mother unaware that the condition my child passed from even existed. A mother who wondered what I could have done to prevent this.

Malrotation of the intestines is a relatively uncommon anomaly with an incidence of 1 in 500 births.

While a baby is still in the womb, its intestines (bowels) form. As they form, they move into their normal position in the abdomen. Intestinal malrotation (IM) happens when the intestines don’t form in the right position. IM most often isn’t a problem by itself, but it makes a child more likely to have a volvulus (twisted intestine).

Mya Nicole was born Jan. 15, 2018, at 37 weeks and one day. Mya had difficulty feeding early on. She had kidney and heart issues, but nothing life-threatening. After three long weeks in the hospital, she was finally able to go home. The next morning was a parent’s worst nightmare. After being transported to a children’s hospital, she was diagnosed with IM. The surgeon confirmed that her bowels had rotated 360 degrees. A second surgery showed blood supply diminished; she was left with roughly 20 percent of her bowels due to necrotic tissue.

Once we were able to take her off sedation, the doctors discovered Mya had suffered a massive stroke and she was diagnosed brain-dead. The moment she was taken off life support was the moment all time stopped. I held her close as my heart sank.

Coping with this is the hardest thing I have ever had to do. If only I had known what IM was and what signs to look for. We are now trying to educate others and raise awareness. Please, go to change.org, search “intestinal malrotation” and sign the petition to help. Jan. 15, Mya’s first birthday, was spent honoring her, with the very first Intestinal Malrotation Awareness Day.

MGH supports Mary and her journey in raising awareness about intestinal malrotation and possibly saving lives in the future.



Chris Kim, MD

Dr. Kim graduated from Temple University in Philadelphia, and Yonsei University College of Medicine in Seoul, South Korea. He completed a pediatric residency

at the University of Tennessee and a neonatal-perinatal fellowship at the University of Louisville.



Janet Leezer, MD

Dr. Leezer received her undergraduate degree, residency and fellowship training from the University of Louisville. After completing her fellowship in neonatal-perinatal

medicine, she served as clinical faculty at the University of Louisville.



Stephan Pepple, MD

Dr. Pepple received his undergraduate degree from Indiana University and his medical degree from Saba University School of Medicine in Saba, Dutch Caribbean. He completed his pedi-

atric residency at Blank Children’s Hospital in Des Moines, Iowa, and his neonatal-perinatal fellowship at the University of Louisville.



Quick Care, When You Need It

*MGH Express Urgent Care
now part of MGH's healthcare
delivery system* BY **TERRI COUSE**



We know ... no one has time to get sick and accidents can happen at the worst possible time. The need to stop what you are doing and seek medical care never seems to come at a convenient time.

Marion General Hospital is excited to now offer MGH Express Urgent Care, located north on the bypass in Marion. It offers timely and quality medical care that is also convenient to your busy schedule.

Stephen Michael Keller, MD, has joined MGH as the medical director of Emergency and Urgent Care Services. Dr. Keller will lead the departments, along with Tammy Cornelious, administrative director of Emergency and Urgent Care Services.

"We have a very strong primary care presence in the entire county," says Stephanie Hilton-Siebert, president

and CEO of MGH. “Sometime late in the evening or on weekends when primary care is not open, the ED is not the appropriate level. Urgent care fills the gap.”

Hilton-Siebert says having urgent care offered at MGH will improve the continuity of care and enhance the electronic healthcare record system.

“When this opportunity came about, it really was the right fit as part of our health system,” she adds. “When you visit MGH Express, the provider will have access to your medical record regarding your last visit, any medications prescribed, and be able to see the whole picture. If a patient has had several events coming in, and providers are trying to figure out what is going on with their disease process, this will allow us to do that.”

Hilton-Siebert says the hospital looked at its overall health system, the services it was providing and the types of access points offered to individuals.

“Our ultimate goal is to ensure that individuals are receiving healthcare. We do that in multifaceted ways. One of those is through our primary care. Individuals can call MGH’s access number, **765-660-MGH4 (6444)**, to schedule an appointment with a primary care provider,” says Hilton-Siebert. “That is important, but it doesn’t always work out. Individuals may have something acute that happens where they need to be seen sooner. For this reason, we will



have this clinic that will be open for urgent care.”

Hilton-Siebert says having urgent care offered by MGH will also allow the hospital to connect urgent care visitors to MGH providers.

“So not only are they being seen for this acute care, but also for prevention and screening—all those types of things that primary care focuses on. We want to get them to a follow-up appointment so that they can have that connectivity,” she says.

In an effort to offer care that is the best fit for the community, Hilton-Siebert says MGH is constantly examining access points and services, and is looking at expanding some current services.

“Chronic disease management and chronic disease management with

subspecialties can be difficult to recruit to a local community,” she says. “MGH is continuing to work with partners in the health field to be able to provide that so individuals don’t have to travel outside of Grant County. If patients need access to a specialty, as a community healthcare provider, we want to be able to provide that.”

“Having local control and having individuals on our board of directors who are vested in our community and live in our community allows us to really look at the needs of our community and then react to it,” she adds. “We have different relationships with various types of healthcare institutions, consultants and other resources available to us. Those partnerships really allow us to develop a great program and focus on our community.” ■



Stephen Michael Keller, MD



Tammy Cornelious, MBA, RN

CALL



Your Time Is Valuable

MGH Express Urgent Care is open 8 a.m. to 8 p.m., seven days a week, so you or your loved one can get back to feeling normal again. MGH Express is located at 1130 N. Baldwin Ave. in Marion and can be reached at **765-660-7480**.



Heartfelt Congratulations

Accreditation of MGH's Chest Pain Center underscores a commitment to cardiac care **BY TERRI COUSE**

➔ Marion General Hospital has once again earned the designation of accredited Chest Pain Center from the American College of Cardiology, demonstrating expertise and commitment in treating patients with chest pain. MGH was awarded Chest Pain Center accreditation based on rigorous on-site evaluation of the staff's ability to evaluate, diagnose and treat patients who may be experiencing a heart attack.

"Accreditation is a symbol of our commitment to create efficiencies in our day-to-day care centered on the latest evidenced-based medicine," says Melo-Dee Collins, NP-BC, cardiovascular service line director and Chest Pain Center coordinator. "It is a commitment to increase community awareness of heart disease as we encourage health and wellness. Even more importantly, it is a commitment to do everything we can to help our patients not only survive, but have the best possible outcome so they can return to their lives."

Swift and Systematic Approach

As an accredited Chest Pain Center, MGH ensures that patients who arrive at the hospital complaining of chest pain or other symptoms of a heart attack receive the treatment necessary during the critical window of time when the integrity of the heart muscle can be preserved.

MGH's protocol-driven and systematic approach to patient management allows physicians to reduce time to treatment



during the critical early stages of a heart attack, when treatments are most effective, and to better monitor patients when it is not clear whether they are having a coronary event. Such observation helps ensure a patient is neither sent home too early nor needlessly admitted.

Passing the Test

Hospitals receiving Chest Pain Center accreditation from the ACC must take part in a multifaceted clinical process that involves: completing a gap analysis; examining variances of care; developing an action plan; a rigorous on-site review; and monitoring for sustained success. Improved methods and strategies of caring for patients include streamlining processes, implementing guidelines and standards, and adopting best practices in the care of patients experiencing the signs and symptoms of a heart attack.

Facilities that achieve accreditation meet or exceed an array of stringent criteria and have organized a team of doctors, nurses, clinicians and other administrative staff who earnestly support the efforts, leading to better patient education and improved patient outcomes.

"I'm honored to lead our MGH healthcare team in striving for clinical excellence and providing our community with quality cardiac care close to home," says Collins. ■

WEBSITE



Discover More About Quality at MGH

To learn more about MGH's awards and other recognitions, visit www.mgh.net and click "About" then "Awards & Accreditations."

BRIDGING THE GAP

MGH's PACT team helps patients continue recovery after acute care

BY **TERRI COUSE**

From the moment of discharge, we make every minute matter. Each post-acute care patient has a story. Put simply, listening well is how we build individualized patient plans for the next steps in a patient's journey. The MGH Post-Acute Care and Transitions (PACT) team provides a continuum of care that bridges the gap from hospital to home.

How Does PACT Work?

The Post-Acute Care Program is built around a team that coordinates treatments across skilled nursing, long-term care, nursing homes, assisted living facilities and rehabilitation facilities. Our post-acute care clinicians help prevent avoidable readmissions, improve alignment between post-acute/acute facilities and promote successful care transitions while striving to provide a higher standard of patient care. We assist in coordinating patients' access to diagnostic testing, lab services and treatments required outside the hospital.

Post-acute care is provided to those recovering from acute illness or suffering from a chronic illness. These residents most often come to us from a hospital; we work with a range of services, such as physical, occupational and speech therapies, to continue their recovery.

The post-acute care team works closely with the patient's primary care

provider and the hospitalists to manage complex medical and social needs of our patients. The team continues counseling patients as they return home, overseeing the ordering of medical equipment as well as providing primary care providers with medication changes and a progress summary of patients' conditions.

What Are the Benefits?

Quality care begins with understanding each patient's unique needs. We're empathetic, attentive and engaged in each patient's experience and challenges. The MGH PACT team has earned national recognition and top accolades in patient care services. (Read more about the team members at right.)

Searching for quality nursing home care can be confusing and overwhelming. We are here to assist you in making the most informed and appropriate decisions to meet your healthcare needs. ■

CALL



Care Designed to Meet Your Needs

For more information, please contact Kristi Singer, RN, PACT team nurse, at **765-660-7720**.

MEET THE TEAM



Shankaran Srikanth, MD

Dr. Srikanth earned his medical degree from M.S. Ramaiah Medical College, Bangalore. He began his career at MGH in 1998 and has over 20 years of experience. He currently serves as MGH's vice chief of staff, chief clinical integration officer and Credentials Committee chair.



Jeffrey Fuller, NP-C

Fuller earned his Master of Science in nursing (nurse practitioner) and his bachelor's degree from Indiana Wesleyan University in Marion. He is certified by the American Academy of Nurse Practitioners and has 25 years of RN/NP experience.



Betty Guerin, NP-C

Guerin earned her Master of Science in nursing (nurse practitioner) and nursing education, as well as her bachelor's degree, from Indiana Wesleyan University in Marion. She is board-certified by the American Academy of Nurse Practitioners. Guerin began her career with MGH in 1982.



Riley Rose, AGACNP-BC/CWCN-AP

Rose earned his Master of Science in nursing from Indiana University. He also holds the certification of adult-gerontology acute care nurse practitioner. He received his wound care nurse certification from Cleveland Clinic School of Wound Ostomy & Continence. Rose began his career at MGH in 2003.

EVENTS & ACTIVITIES

Continuous education programs and support groups

CLASSES

DIABETES

Classes are offered monthly. Physician referral is required. For more information, call diabetes education at 765-660-6690.

FREEDOM FROM SMOKING

Call Paige Linger at 765-660-6557 or email paige.linger@mgh.net.

PRENATAL EDUCATION

Classes provided in conjunction with Family Service Society Inc. Class times vary. Call 765-660-7893 or visit www.mgh.net for more information.

SAFE SLEEP CLASSES

Expectant parents and parents/caregivers of children under the age of 1 are invited to learn how to provide a safe sleep environment. Call 765-660-7893.

Dates: Meets the third Thursday of each month

Time: 4:30-5:30 p.m.

Location: MGH South Marion Medical Park, 1410 Bella Drive

COMMUNITY SERVICE

CAR SEAT SAFETY

Free service for parents and caregivers for inspection, fitting and instructions on proper installation of a child car seat. (Both child and car seat must be at inspection.) Call 765-660-6860 for appointment.

Date/Time: By appointment only

Location: MGH Parking Garage, 441 N. Wabash Ave.

SUPPORT GROUPS

(All support groups are free)

BARIATRIC SUPPORT GROUP

Support group for individuals who have had bariatric surgery or are interested in bariatric surgery, as well as those who are participating or wish to participate in medically supervised weight loss. Call 765-660-7133 for more information.

Dates: Meets the third Thursday of each month (does not meet in December)

Time: 6:30-8 p.m.

Location: MGH 330 Building, Conference Rooms 1-2, 330 N. Wabash Ave.

CANCER SUPPORT GROUP

For patients and families affected by cancer. Call 765-660-7800.

Dates: Meets the third Tuesday of every month

Time: 5-6 p.m.

Location: MGH Cancer Center, 831 N. Theatre Drive

NEW MOM GROUP

A safe place to find support from other new and expectant mothers. Infant weight checks, feeding and nutrition, safety issues and postpartum depression are a few topics covered. Refreshments available. Call 765-660-6866.

Dates: Meets every Tuesday

Time: 11 a.m. to 12:30 p.m.

Location: South Marion Medical Building, conference room, 1410 W. Bella Drive

TRAUMATIC BRAIN INJURY SUPPORT GROUP

Caregivers and survivors of all types of head injuries welcome. Discuss daily challenges of injured patients and their caregivers as they relate to independent living and returning to the workplace. The main focus is on providing social support. Call Ann Miller at 765-660-6360 for more information.

Dates: Meets the second Tuesday of each month

Time: 6:30-8 p.m.

Location: MGH Fifth Floor, Conference Room B, 441 N. Wabash Ave. ■



CLASS



Come Learn with Us

To register or learn more about our programs, please call the numbers listed or visit www.mgh.net (click "Events").

When it comes to grandpa's health,

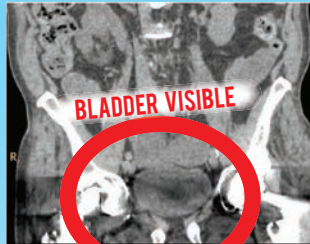
KNOWLEDGE IS POWER



OLD TECHNOLOGY



NEW TECHNOLOGY



That's why MGH proudly offers the latest advancements in medical images, reaffirming our commitment to provide the highest quality care to our valued patients and community.

- High-quality imaging with a low radiation dose
- Fast and accurate results
- Imaging through metal implants
- Physicians can detect and treat disease early

THE WORLD VIEW MAY BE EVER CHANGING –
OUR VIEW REMAINS FOCUSED
ON OUR COMMUNITY.

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