

SPECIAL INAUGURAL ISSUE

HEALTHWISE

THE MAGAZINE OF METHODIST HOSPITALS, FALL 2010



Transforming Patient Care:

What the Region's first hospital-wide implementation of the Epic electronic medical record means to you...

- Streamlined Registration
- Shorter Waiting Times
- Enhanced Patient Safety
- Less Time Documenting Care, More Time Giving Care

Know the Risks of Peripheral Artery Disease

State-of-the-Art Approaches to Battling Breast Cancer

...and Much More



METHODIST
HOSPITALS

LEADING THE WAY TO BETTER HEALTH.

WELCOME FROM THE CEO



Welcome to the inaugural issue of Methodist Hospitals' new community magazine, HealthWise. As you look through its pages, you'll find helpful information on important health topics like preventing stroke, the growing problem of Peripheral Artery Disease and steps you can take to protect yourself against osteoporosis. This issue also features some of the ways in which we are leading the way

to better health for Northwest Indiana.

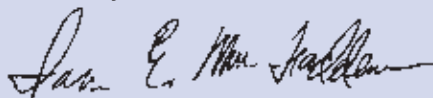
At Methodist Hospitals, everything we do is designed to ensure that we provide the best patient experience.

- Methodist Hospitals is the first Northwest Indiana hospital to implement the EPIC electronic medical system hospital wide. This technology will improve safety, reduce waiting times, streamline recordkeeping, and help us improve the overall quality of the care we provide.
- In 2010, we have dedicated approximately \$35 million to new technology, facility enhancements and programs designed to improve patient safety, comfort and quality of care.
- Methodist Hospitals, of all the hospitals in Northwest Indiana, attracts the most complex cases across a range of specialties, including stroke, brain tumor, cancer, trauma and high-risk pregnancy. This is the result of our commitment to providing the expertise and technology needed to offer the most advanced clinical care.
- No other hospital in Northwest Indiana shares our significant history and commitment to caring for those who can least afford care.
- Every dollar of profit at Methodist Hospitals is reinvested in the people, programs and technology that help us to serve you better.

Leading the way to better health means offering the most comprehensive care available in Northwest Indiana. It also means offering the most comprehensive and helpful information to help community members take control of their own health.

That is our goal with HealthWise. Please give us your feedback by calling the Marketing and Corporate Communications Department at 219-886-5972 or email us at www.methodisthospitals.org.

Sincerely,



Ian McFadden, FACHE
President/CEO

Blazing an Epic Trail:

Methodist is the first Northwest Indiana hospital to adopt the Epic electronic medical record hospital-wide

Living in the digital age affects every aspect of our lives. Evolving technologies bring new ways to enjoy entertainment, perform tasks, access information, and more. In the healthcare arena, one of the most exciting aspects of the digital age is the electronic medical record (EMR) system.

Transforming Patient Care

It's the wave of the future. More and more hospitals and health care providers are preparing to transfer from paper charts to an EMR system. The leader in EMR systems is Epic, and in Northwest Indiana, Methodist Hospitals is leading the way by being the first to implement Epic hospital wide. Epic has also been the choice of such nationally known Chicago area providers as Rush University Medical Center, Northwestern Memorial Hospital, University of Chicago Hospitals, Northshore University Health System and health care giant, Kaiser Permanente.

The Epic system links all hospital departments and specialties, creating a single electronic record of a patient's entire medical history. "Our hospital-wide implementation of this system is transforming our delivery of patient care, greatly enhancing patient safety, treatment and service," said Ian E. McFadden, President and CEO of Methodist Hospitals.

Instant Access for your Doctor

With Epic, doctors can access any patient's entire medical chart from their computers or handheld devices such as iPads. Such instant access shortens the length of time it takes to perform care. "For doctors like me this is amazing. We can find so much more information without really having to search for it," said Kumar Venkat, MD, Gastroenterology, Internal Medicine.

What's more, instead of just reading about test results, doctors can actually see them firsthand; Epic illuminates, presenting a firsthand view of CT scans, movies of heart catheterization, X-rays and more.

"Investing in cutting edge technologies is an important aspect of our commitment to the communities we serve, and Epic is considered to be a 'best of breed' system," McFadden said. "Already, the response from our physicians, nursing staff and ancillary areas has been overwhelmingly positive."

Instant patient record access shortens the length of time to deliver quality care.

The software is so user-friendly that even staff members who were initially unsure have wholeheartedly embraced the system. Methodist physicians have also embraced Epic. According to Hakam Safadi, MD, Pulmonology, Internal Medicine, "Epic is the best thing to happen to Methodist in the last 10 years. With everything at the tip of your fingers, it makes rounds easier and more enjoyable!"

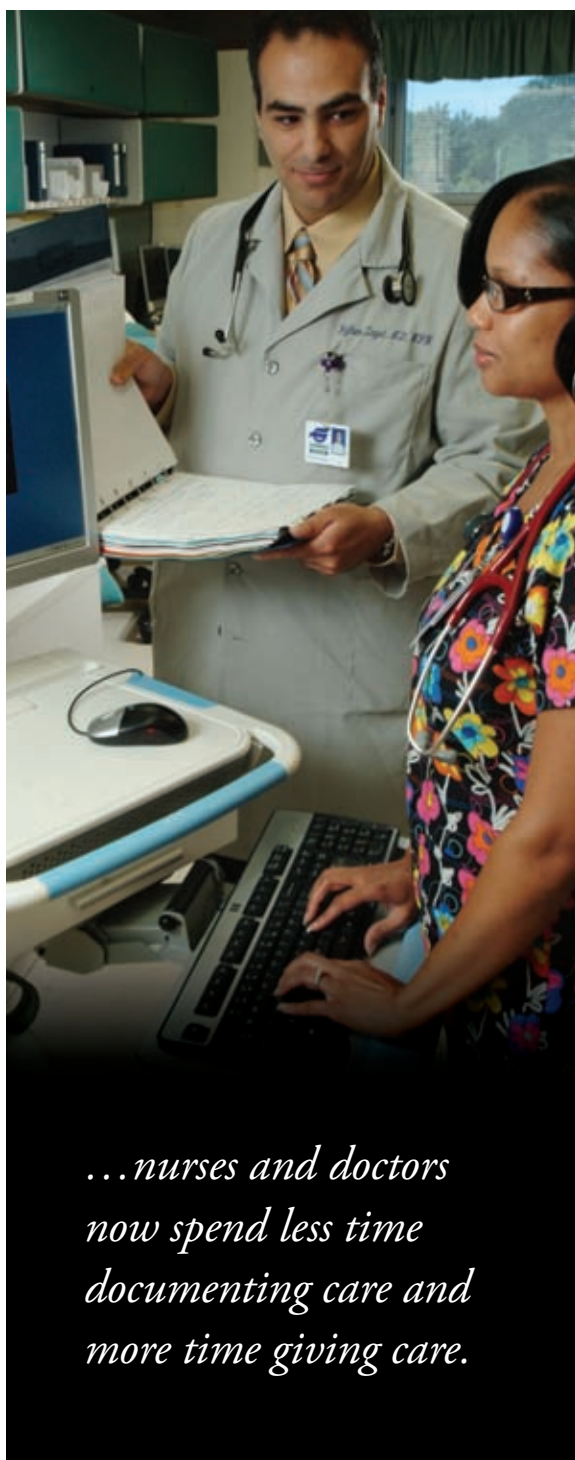
A Regional Leader in Healthcare

The advent of the electronic medical record signals a significant change in Methodist Hospitals' culture and in the culture of the delivery of health care. It's going to greatly improve healthcare and allow providers to obtain data more easily and quickly about the disease processes they are confronting. That alone is going to advance our delivery of healthcare, in terms of both quality of care and patient experience.

"It is engrained in the culture of Methodist Hospitals to embrace those technological advances that further our mission to provide the utmost in patient care. Implementing this momentous change reinforces our position as a regional leader in Northwest Indiana," said McFadden.

Epic Means Improved Patient Care

Because Epic gives Methodist healthcare providers immediate access to real-time patient information, our efficiency and ability to provide the best care are dramatically increased.



...nurses and doctors now spend less time documenting care and more time giving care.

In the past, coordinating patient care involved locating records, charts or notes from different hospital departments and physicians. Now, all of Methodist clinicians can access the exact information they need, when they need it.

It's easy to see, for example, how much more effectively this will enable physicians to manage patients with chronic diseases.

Overall, a consolidated patient medical record that includes information about the patient across clinical areas allows decisions to be made more quickly, and handoffs from one to the next or one unit to another to be smoother, reducing the likelihood of errors. Peter Tothy, MD, Hematology, Oncology and Internal Medicine observes, "The new Epic format helps organize data, clearly improving my workflow. It is very helpful to now have all the data for a patient centralized and easily accessible."

Faster Lab Results, Medication Orders; Shorter ER Wait Times

Having vital patient information instantly at the fingertips of hospital admissions personnel, physicians and nurses

facilitates faster submission and turnaround of medication orders, enables lab staff to process specimens more quickly, and means that emergency department waits can be significantly reduced. At the patient's bedside, nurses and doctors can spend less time documenting care and more time giving care.

Epic will also help both the physician and the hospital facilitate patient wellness and prevention efforts. Physicians will have access to evidence-based medical information, patients will be able to access educational materials online, and doctors will be able to direct patients to appropriate screening and diagnostic procedures.

Lifesaving Screening Reminders

For example, Epic will allow a physician to identify patients over age 50 that have never had a colonoscopy so that these patients can be encouraged to schedule this recommended procedure.

One of Epic's greatest advantages is that it helps to enable all patients to become more active participants in their own care.



Epic Means Better Patient Service from the Doctor's Office to the Hospital

Part of being a regional leader means delivering the best patient service, and Epic helps Methodist Hospitals to do just that.

Family doctors and specialists have instant access to every hospital visit record and test result

Electronic medical records streamline patient registration, scheduling, billing and other patient issues. Time spent filing, retrieving and maintaining paper medical records is greatly reduced...and less time spent attending to paperwork means there is more time to attend to patients.

No Need to Repeat your Medical History

Having a permanent electronic record also means that patients at Methodist no longer have to repeat their medical history and medications to each caregiver they see. Beyond the convenience this provides, it can be a great help for some patients who might have trouble remembering the names of their medications and exact doses.

And coming soon, Methodist Hospitals will offer the Epic EMR system to its physicians for use in their offices. This means, when a patient's doctor is a member of Methodist's medical staff, all of that

patient's office visit information will be a part of that record as well. Their family doctor and any specialists they see who are on staff at Methodist Hospitals will have instant access to all of their hospital visit records, including lab test results, results of other diagnostic tests such as MRI, CT scans and mammograms without the patient having to carry them from one place to another or paying to have them shipped.

No More Medication Lists

It also means that Methodist will have instant access to the records from these patients' physician visits, eliminating the need to remember to make a list of all the medications a doctor has prescribed when going to the hospital – the hospital will already have that information.

Ultimately, patients will be able to access their own medical information through a secure, online connection. In the coming months, hospital lab results and discharge instructions will be available via MyChart. Additional capabilities will be added over time – patients will be able to do things like access doctors' records of office visits online, check their family's immunization records (especially convenient at back-to-school time), print out growth charts and even communicate with their doctors online.



Epic Means Enhanced Patient Safety

In addition to streamlining patient care, Epic enhances patient safety at Methodist.

With Epic, treatment orders, medication orders, and documentation are entered directly into the Epic system, greatly reducing the chance of miscommunication and misinterpretation. Prescriptions are sent to pharmacies electronically. As a result, a patient's safe care need not be jeopardized by the legibility of a medical professional's handwriting.

Automatic Drug Allergy and Interaction Alerts

No matter where patients go within the Methodist Hospitals system, their entire history, including allergies, medications...everything... can be immediately accessed. Epic delivers automatic alerts to warn of drug allergies and potential interactions or complications when a medication is initially prescribed.

Electronic prescriptions and doctors' orders help ensure that each Methodist patient gets the right medication and treatment.

Often, patients are prescribed different medications by different doctors, which can cause problems. Epic performs "behind the scenes" work that will detect potential interaction issues or possible complications.

Before administering medications, nurses scan the medication and also scan a bar-coded wrist band that is worn by the patient.

"Once I scan the patient's bracelet, I instantly know the right medication and the right dosage and confirms that my patient matches the EMR (Electronic Medical Record). Instead of double checking myself, I can go directly to the patient and administer the correct dosage. EPIC allows me to concentrate on patients wants instead of just their needs," said Methodist medical/surgical unit nurse, Kathy Rais.

Up-To-Date Patient Records for Life

An additional patient safety benefit lies in longevity of the patient's medical record. With the old paper system, medical records need only be kept for 10 years while electronic records remain with a patient for life. If, for example, a patient has had a reaction to a medication more than 10 years ago, that information may easily get lost in paper records. With Epic, a doctor can readily see that and decline to prescribe a medication that is in the same family.

From an institutional standpoint, Epic allows us to track incidents that raise safety issues. Every instance is charted and sent to our Quality Department for evaluation, a great help in our goal of continuous quality improvement.

CANCER CASE REVIEWS:

State-of-the-Art Approaches to Fighting Breast Cancer



Bharat Barai, MD

The latest technologies combine with dedication and teamwork to make Methodist the hospital of choice for the detection and treatment of breast cancer. Patients benefit from the most up-to-date treatments and technologies, case collaboration by a team of specialists, and the exceptional

depth of knowledge and expertise of our dedicated staff. In June 2010, our cancer program received seven commendations from the American College of Surgeons.

Mammography screenings take place in our digital mammography unit, where they are read by a dedicated radiologist. A digital checker assists this specialist in identifying abnormalities. In October 2010, we will be further increasing our efficiencies with the installation of the top-of-the-line PenRad reporting and tracking system.

If a screening mammogram shows suspicious results, it is followed up with a diagnostic mammogram and possibly an ultrasound. When a lesion is detected, our experienced radiologist performs a needle biopsy with results that are usually available in less than 48 hours.

Unique to Methodist, breast cancer and all other cancer cases are presented at bi-weekly Cancer Case Reviews. At least five specialists – an oncologist, radiation oncologist, surgeon, pathologist and radiologist – give opinions about the most appropriate treatment for each case, consistent with national guidelines. Methodist's Cancer Case Review process has not only earned special commendation from the American College of Surgeons, it has been written up in an article that was published nationwide.

Unusual breast cancer cases receive additional attention at monthly Breast Cancer Conferences, which are both a clinical case review and an educational conference. A minimum of the five specialists mentioned above present a detailed review of each case that includes an in-depth look at the pathology. Recommendations are made about the appropriate modality of case management that is, again, consistent with national practice guidelines.

The educational dimension of our Breast Cancer Conferences is somewhat unique to Methodist Hospitals. The presenter creates an educational presentation that focuses on unusual features of a case. Topics can cover recent advances in breast cancer treatment, new drugs that are under development, and what new data have become available from national meetings.

The staff at Methodist looks forward to attending these informative sessions as an opportunity to acquire more knowledge and learn the latest findings. Meetings are generally attended by 40 to 50 people, at least 10 of which are doctors, and include nurses and other healthcare professionals, such as radiation therapists, mammography technologists, clinical dieticians and others.

With a staff that is well-educated in the latest in the diagnosis and treatment of breast cancer, superior resources that include the newest and best technologies, and through Cancer Case Review and Breast Cancer Conferences, breast cancer patients at Methodist Hospitals receive the finest care available.

Bharat Barai, MD, board certified in hematology, oncology and internal medicine, is medical director of the Methodist Hospitals Oncology Institute.



CLEARING THE MAMMOGRAM CONFUSION: Start Annual Screenings at Age 40

Many women were confused last year when the U.S. Preventative Service Task Force recommended that women without a palpable lump or similar cause of concern wait until age 50 to begin annual mammogram screenings.

For years, it has been accepted that breast cancer screening mammography should be performed on women starting at age 40. In fact, the American Cancer Society and the National Cancer Institute have not changed that very recommendation.

“At Methodist Hospitals, we recommend that our patients adhere to the original American Cancer Society guidelines,” said radiologist Ken Segel, MD. “We perform a lot of mammogram screenings for women between age 40 and 50. And we find quite a few cancers among women in that age group.”

To clarify, the American Cancer Society recommends that women have a routine mammography screening yearly starting at age 40. They also indicate that women should have clinical breast exams (performed by a doctor as part of a woman's yearly exam) once every three years for women in the 20's and 30's and annually at age 40 and over.

Please direct any additional questions to your doctor. Women should always consult their physicians about their histories to determine if they should begin screenings at an earlier age. If you don't have a doctor, call the Methodist Hospitals 24/7 Physician Finder at 1-888-909-DOCS (3627).

Taking Steps to Prevent Osteoporosis

Osteoporosis is the most common bone disorder and a major health care issue.



Elian Shepherd, MD

Statistics show that eight million women and two million men in the US are diagnosed with osteoporosis each year. One in two women and one in four men over the age of 50 will have an osteoporotic fracture.

Osteoporosis is a disease in which the body loses bone mineral density, effecting strength and increasing the risk of fracture. There are no warning signs as it develops and in its initial stages, most people don't even realize they have it. Symptoms such as bone fracture, pain, deformity and disability may not appear until the disorder becomes more advanced.

We often think of osteoporosis as a condition that is specific to older women. Studies show that post-menopausal women are at greatest risk, but young people can also be affected.

Primary osteoporosis most frequently occurs after menopause in women and later in life for men. Secondary osteoporosis can result from smoking, alcoholism, being underweight, having a low level of physical activity, and certain medications, conditions, or diseases. Fortunately, there are steps that can be taken to help minimize the risk.

Begin Maximizing Bone Mass Early

The bone tissue is constantly going through a bone remodeling cycle, where some bone is absorbed by the body and new bone forms to replace it. As we age, more bone is removed than is replaced. Maximizing bone mass early in life can greatly reduce the impact of bone loss due to aging.

The single most important nutrient for improving bone mass and for preventing and treating osteoporosis is calcium. Girls should start taking 1200 mg of Calcium plus 800 units of Vitamin D starting at age 20 to help prevent osteoporosis later in life.

Performing regular exercise helps keep bones strong and healthy. High-impact exercises are most beneficial, such as speed walking, jogging, and aerobics. Later in life, even beyond the age of 90, exercise can increase muscle mass and strength.

It's important to eat the right foods, avoiding diets that are high in protein, caffeine, phosphorus, and sodium. Young people often deprive themselves of proper nutrition and start bone loss at an early age.

Treatment Options

Drugs that are used to prevent and treat osteoporosis fall into two categories. Antiresorptive drugs help prevent the breakdown of bone and include bisphosphonates, hormone replacement therapy, selective estrogen-receptor modulators and clacitonin. Anabolic drugs help rebuild bone.

Generally, a combination of therapies is used to both prevent and treat osteoporosis. Non-pharmacological approaches include taking Calcium and Vitamin D, exercise, and lifestyle changes such as quitting smoking.

The most important thing to remember is that steps can be taken throughout life to keep bones strong to avoid or minimize osteoporosis. The right kinds of exercise, nutrition and lifestyle choices go a long way towards maintaining healthy, strong bones for life, and the earlier people start the better.

Elian Shepherd, MD, is a board certified orthopedic surgeon and medical director of the Methodist Hospitals Spine Care Center.



Stop the pain. Start living again.

Your search for genuine relief from chronic pain due to spinal disease or injury is finally over.

The new Spine Care Center at Methodist Hospitals takes an innovative, team-oriented approach to treat people who want the right care, right now. We identify the cause of your pain and we deliver the most effective treatments available anywhere – from physical therapy to surgery. It all starts with a rapid review of your condition at no out-of-pocket expense to you.

**To learn more, attend a FREE Healthy Back and Neck Seminar
October 20, October 27, November 3, November 10, November 17**

Space is limited. Call 1-888-909-DOCS (3627) to register.

Peripheral Artery Disease Risks Your Mobility and More

As many as 12 million Americans have Peripheral Artery Disease, or PAD, which is associated with the risk of heart attack and stroke, and many people know nothing about it.



Andre Artis, MD

PAD is a narrowing of the blood vessels that supply your legs, feet and arms with fresh blood. In PAD, fatty deposits line the walls of blood vessels. This causes blockages and slows the blood flow to these vital areas.

The most common symptoms are leg pain, cramping, heaviness or fatigue in the thigh or buttock muscles while walking or climbing stairs. In many cases, those with PAD misinterpret this pain as related to other ailments. They often assume that PAD is just leg cramps and that their walking difficulties are related to getting older. Those with diabetes sometimes confuse PAD pain with a neuropathy, a common diabetic symptom that is a burning or painful discomfort of the thighs or calf muscles.

Characteristically, PAD pain increases with exercise of the lower extremities and goes away at rest. It may return when activity resumes. In later stages, circulation problems may occur at rest – especially at night. In more advanced cases, inadequate blood supply can lead to sores, gangrene and can even require amputation. Doctors at Methodist Hospitals are particularly concerned about PAD because Northwest Indiana leads the state in limb amputations. Other symptoms of PAD may include:

- Leg numbness or coldness in the feet
- Sores on feet or legs that won't heal
- A change of color in the feet
- Hair loss on feet and legs, or changes in toenails
- Erectile dysfunction in men

Certain risk factors for PAD, such as age or having a family history of PAD, heart disease or stroke, are essentially unavoidable. However, some risk factors can be controlled, including:

Cigarette Smoking – According to the American Heart Association, smokers have four times the risk of PAD as nonsmokers.

Diabetes – Having diabetes increases the risk of PAD, as well as other cardiovascular diseases. Effectively managing diabetes can reduce the risk of PAD.

Obesity – Those with a Body Mass Index of 25 or higher are more likely to develop heart disease and stroke even if they have no other risk factors.

Physical Inactivity – Physical activity increases the distance that people with PAD can walk without pain. It also helps decrease the risk of heart attack and stroke.

High Cholesterol – Because it directly contributes to the build-up of plaque in the arteries, managing cholesterol levels is essential to prevent or treat PAD.

Kidney Disease – this known risk factor for coronary heart disease and stroke has emerged as an increasingly common PAD risk factor.

Controlling your weight, exercising regularly, lowering your cholesterol and not smoking are lifestyle modifications that effectively treat PAD in most cases, as well as reduce the risk for heart disease and stroke.

If you are experiencing any of the PAD symptoms listed here, you should contact your physician. By listening to the pulse on areas of your legs and feet and measuring the blood flow, or comparing blood pressures in your upper and lower extremities, your physician can get an indication of whether or not you have PAD.

Andre Artis, MD, is an interventional cardiologist affiliated with Methodist Hospitals.



PAD Treatments and Clinical Trials

Treatment for PAD focuses on reducing symptoms and preventing further progression of the disease. According to Dr. Artis, lifestyle changes, exercise and medications are enough to slow the progression or even reduce the symptoms of PAD. Surgical procedures are generally reserved for cases in which there is considerable risk to tissues or for cases where PAD is directly threatening a patient's lifestyle or ability to work.

Medication – Blood thinning medications, such as aspirin and Plavix may be prescribed with medications to relax the blood vessels and promote blood flow. Your doctor may also prescribe medications to lower high blood pressure or high cholesterol, manage diabetes or relieve pain.

Endovascular Treatment – These minimally invasive procedures involve threading a catheter through the artery to the site of the blockage. A balloon enlarges the artery to its normal size or a stent is inserted to hold the artery open.

Vascular Surgery – If a long portion of an artery is blocked, vascular surgeons can reroute blood flow around the blockage with synthetic materials or a blood vessel from another part of the body.

Thrombolytic Therapy – Your doctor may inject a clot-dissolving drug into your artery at the point of a clot to dissolve it.

Methodist Hospitals is currently participating in three clinical trials of PAD therapies.

Those interested in participating in these clinical trials are invited to call 1-888-909-DOCS.

TIME

is of the Essence when Treating Stroke



Sanjeev Maniar, MD

Not so long ago, little could be done to help the victims of a stroke. Today, there are treatments that can actually reverse the damage – if those treatments are administered in time. And Methodist Hospitals is among the pioneers of treatments that are extending the window for

treatment further and further.

Patients reaching the hospital within two to four hours of having a stroke can benefit from clot-busting medications. Within the first three to four-and-a-half hours, intravenous tPA can be administered. This drug can dissolve blood clots, which cause most heart attacks and strokes. tPA is the only drug approved by the U.S. Food and Drug Administration for the acute treatment of ischemic stroke.

A regional leader in stroke treatments, Methodist Hospitals has Northwest Indiana's only biplane CT scanner, which can extend the treatment window for many patients from three to six hours.

Methodist is fortunate to have on staff an interventional neuro-radiologist, a specialty generally found only at tertiary care centers. A highly trained specialist, Dr. Mayumi Oka can perform intra-arterial tPA within six hours of stroke onset. Dr. Oka can also perform an angiogram procedure using the penumbra system, a revolutionary device that can be used between an unprecedented six to eight hours following a stroke.



Clearing up Misconceptions

Some people still believe that the effects of a stroke are always irreversible, but today's ever-increasing variety of treatments can help. Another dangerous misconception is to assume that you'll know when you're having a stroke. Unlike a heart attack, most strokes do not hurt, so it's possible to have a stroke and not even know it.

Know the Signs

Every minute counts during a stroke, which is why it's so important to know the signs. The acronym FAST is an easy to remember, useful tool for identifying possible symptoms. F stands for facial weakness, A is for arm weakness, and S means speech difficulty. T is a reminder that "time is brain," meaning the quicker the treatment, the better off you will be.

Often the symptoms of a stroke can mimic other things, leading people to take them more lightly than they should. Beware of sudden onset blurred or double vision, nausea or vomiting. Profound weakness and tingling on one side should also be taken very seriously. At any sign of a stroke, people should immediately call emergency medical services.

Reducing Your Risk

While some risk factors for stroke cannot be changed, many can. The three biggest controllable factors are cigarette smoking, high blood pressure, and high cholesterol, closely followed by physical inactivity. It's also important to note that certain pharmacies and drug companies offer programs to offset the cost of common medications, including some for high blood pressure.

Other conditions can increase the risk of stroke. Many people don't realize that cardiovascular and cerebrovascular disease are connected, which means the presence of one presents a risk factor for the other. Diabetics who keep their blood sugar under control also reduce their risk of stroke.

Methodist Hospitals holds monthly stroke screenings at alternate campuses. To learn more, call 1-888-909-DOCS (3627) or visit www.MethodistHospitals.org.

Sanjeev Maniar, MD, board certified in neurology, is medical director of the Methodist Hospitals Stroke Program.

Award-Winning Stroke Care

Methodist Hospitals' commitment to provide the best stroke care in the region is backed by our investment in the highest level technology and top quality staff. In 2010, we received Primary Stroke Center Certification by the Healthcare Facilities Accreditation Program (HFAP). HFAP certifies only those facilities that comply with national standards for stroke; their certification is a patient's guarantee of receiving the best stroke care possible.

Also in 2010, our Stroke Program was awarded the Silver Performance Achievement Award by the American Heart and Stroke Association. Methodist is the only hospital in Northwest Indiana that has ranked in the top ten nationwide, receiving the Stroke Care Excellence Award from HealthGrades for six years in a row.

Conquering Obesity

Losing weight isn't always as simple as choosing a diet and sticking to it. Sustainable weight loss involves a commitment to making a lifestyle change, especially when the dieter suffers from obesity.



Paul Stanish, MD

For the obese patient, the path to successful weight loss involves a highly individualized approach, with doctors, medical staff and patient working together towards a common goal. Patients receive initial counseling to determine whether a medically managed weight loss program or surgery would be most appropriate.

There are many combinations of approaches that can be tailored to the needs of individual patients.



Omar Shamsi, MD

Obesity is almost always associated with co-morbidities such as hypertension, diabetes, sleep apnea, and high cholesterol, among others. Most obese individuals have a combination

of these diseases and how well they are managing them becomes a factor in treatment.

Non-Surgical Weight Loss

A medically supervised diet program can render excellent results, and is usually recommended as the first approach to try. In an initial assessment, the physician can determine the patient's body mass index and learn about their co-morbidities and motivations.

In counseling sessions, goals are set and patients are taught how to keep a food log to make them more aware of the food they eat throughout the day. Instead of setting a strict diet, a lifestyle change is developed that involves making healthier food choices that a patient can live with. Exercise plays a key role as well.

Surgical Weight Loss

Once a person has made one or more honest attempts to lose weight but, for whatever reasons, has been unable to keep the weight off, he or she may be a candidate for a surgical weight loss procedure, or bariatric surgery. Patients should realize that surgery isn't a "magic bullet" and that sacrifices must be made in order for it to be successful long-term. Patients must also meet certain criteria.

Prior to surgery, patients benefit from attending a seminar that delivers a realistic overview of the surgeries available including what to expect and possible complications. The doctor and patient work together to identify a weight loss goal and to discuss previous weight loss attempts, the patient's diet, current health problems and physical limitations. Sometimes a patient needs to be brought into better health before surgery can be safely performed.

Weight loss surgeries include lapband, gastric bypass or sleeve bypass surgery. The choice of which surgery to perform is made based on the patient's situation. Patients attend surgery-specific classes to learn how to use the surgery as a tool, including how to eat and exercise afterward.

"You Saved My Life"

Bariatric doctors see changed lives on a daily basis. Losing enough weight can bring an end to or reduction in certain co-morbidities and the daily medications patients require. Patients are happy to regain good health and be able to participate in activities like shopping, socializing and playing with grandchildren so much more freely and easily.

Whether through surgical or non-surgical means, weight loss involves a lifetime commitment. In return, it gives patients back their lives.

Paul Stanish, M.D., is a board certified general surgeon who performs the most advanced surgical applications for patients who suffer from morbid or severe obesity.

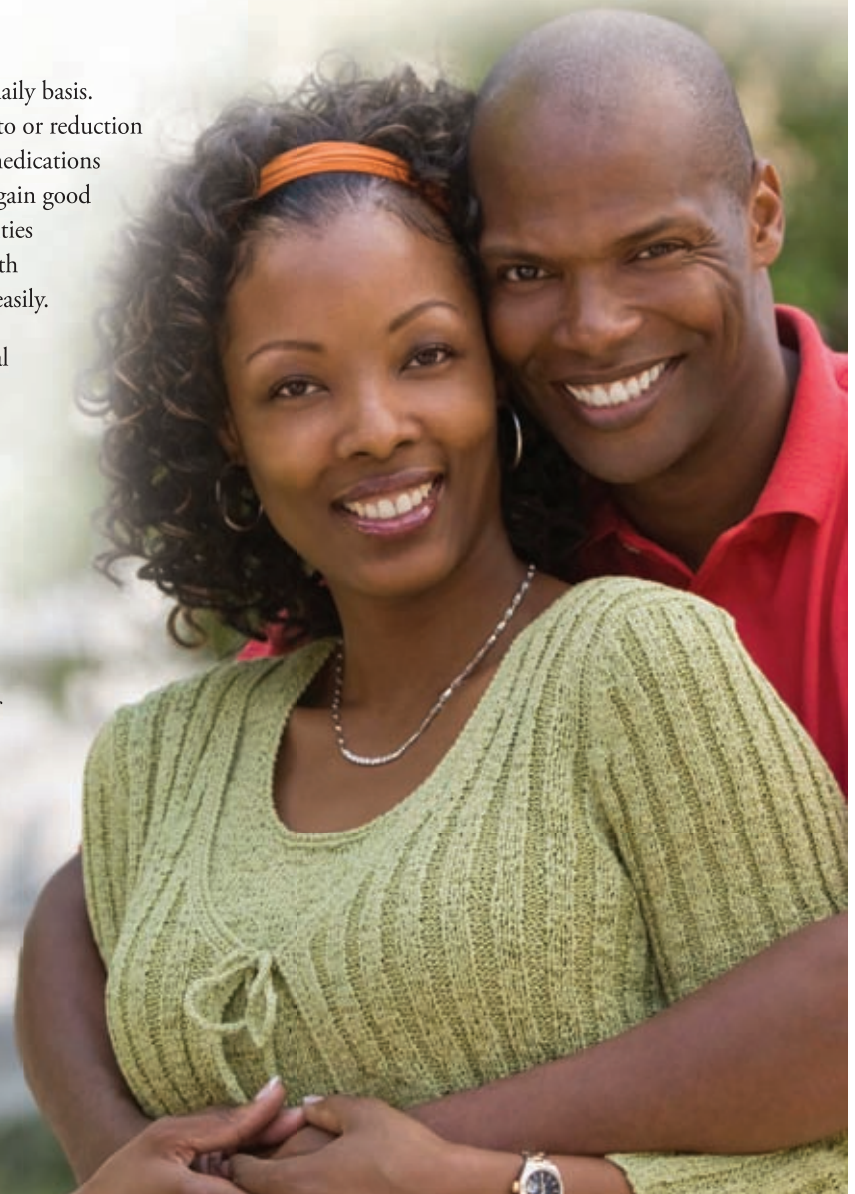
Omar Shamsi, M.D., is board certified in internal medicine with a focus on bariatric medicine. Both are part of the Methodist Hospitals ReStart Center team.

THE RESTART CENTER AT METHODIST HOSPITALS

A Bariatric Center of Excellence

The ReStart Center is the only hospital in Northwest Indiana to be designated as a Bariatric Surgery Center of Excellence by the American Society for Metabolic and Bariatric Surgery. To be awarded and maintain this designation, a center must live up to high standards. Among these are meeting strict procedural guidelines and having a high success rate. It is a patient's assurance that they will have a well-trained, competent surgeon.

In The Methodist Hospitals ReStart Center, top-notch physicians, dietitians, specially trained nurses, therapists, and other staff members team up with patients to help them achieve healthier lives. This supportive environment has been the setting for an overwhelming percentage of success stories since 2002.



Methodist Stories:

Fast-acting first responders and Methodist ER team save Hobart man

On Wednesday, August 4, Jim Meinert was on the job. He was delivering oxygen to home health patients across Northwest Indiana. Before the day was over, his life would be saved thanks to the combined efforts of an Indiana State Trooper, two Hoosier Helpers, Gary paramedics and the physicians and nurses at Methodist Hospitals.

Early that afternoon, Jim was experiencing intense pain in his shoulder and upper arm. The 29-year-old former paramedic knew something was seriously wrong, and he decided to drive to the emergency room. On the way, he had a heart attack.

Indiana State Trooper Dale Turner was on the job, too. Just before 3:00 p.m., he observed vehicles swerving to avoid a truck slowly driving west in the eastbound lanes of U.S. Route 20, just west of County Line Road in Gary. As Trooper Turner got closer, he saw that the driver was slumped at the steering wheel. It was Jim.

After positioning his car to stop the truck, Trooper Turner found Jim unconscious and without a pulse. He extracted Jim from the truck and administered CPR. As he was treating Jim, Trooper Turner radioed what was happening.

Jim Salkeld and Brett Manes were on the job, too. They're Indiana Department of Transportation Hoosier Helpers, and they were just two minutes away at the local Traffic Management Center. They heard Trooper Turner's radio transmission and jumped into one of the familiar Hoosier Helper trucks. Every Hoosier Helper truck is equipped with an automated external defibrillator (AED), a portable electronic device that diagnoses cardiac arrest and treats it through electric shock.

Within minutes Salkeld and Manes arrived at the scene. It took three shocks from the AED to restore the Hobart resident's heartbeat and breathing.

Gary Fire Department paramedic supervisor, Blair Clifford soon arrived in his EMT rig. He saw that Jim was breathing and moved him into the ambulance. He then took measures to assist his breathing, stabilize him and rush to the Methodist Hospitals Northlake Campus.



James Meinert (front row with AED unit) is joined by the team that saved his life this summer. Front row: Hoosier Helper Brett Manes, Gary paramedic supervisor Blair Clifford, Methodist ER nurse Sandi Huff, Indiana State Trooper Dale Turner and Hoosier Helper Jim Salkeld. Back row: Methodist emergency physician Dr. Nicholas Johnson and Methodist ER nurse Shannon Hutchens.

On the way, Jim began posturing, an involuntary extension of the arms and legs that often indicates brain injury, such as a stroke or brain hemorrhage. Clifford spent the 10-minute drive to Methodist monitoring his condition, watching his airway and continuing to stabilize James.

Methodist emergency physician Dr. Nicholas Johnson and Methodist emergency nurses met the ambulance, and could immediately see that Jim was a critical patient. They moved him into the main trauma resuscitation unit.

He was still unconscious. They knew that his heart had stopped, but he was demonstrating symptoms of a severe brain problem.

"On the gurney he was posturing, drenched in sweat, and his blood pressure and heart rate were through the roof," Dr. Johnson said. "Jim was also becoming combative, which is an indication that his brain lacked oxygen for a while."

Before they could treat Jim, the Methodist ER team had to determine if there was any bleeding in his brain. Some of the preferred heart attack treatments could aggravate a brain injury. Within these critical first minutes, they also had to administer medications to stop him from resisting treatment.

"I can count the number of heart attacks I've seen in people in their 20's on one hand," Dr. Johnson said. "But a normal CT scan of the brain and subtle, but a real finding on an EKG confirmed that Jim had suffered a heart attack."

That freed Methodist physicians and staff to transfer Jim to the cardiac catheterization lab for treatment. He was ultimately transferred to the Methodist Southlake campus so an electrophysiologist could fit Jim with a permanent defibrillator in his chest. He was back home eight days after his heart attack.

Now that he is fully recovered, what has Jim taken from this experience? Well, he has decided to obtain the certification required to become a paramedic again. He has also started a letter-writing campaign urging the state legislature to equip every Indiana state trooper with an AED.

"Jim was essentially dead when he was on the road," Dr. Johnson added. "He is alive today because everything went exactly the way it should before he arrived at Methodist. It's a shame that for a lack of resources, it can't happen like that every time."

Do you have a Methodist Story?

We would appreciate it if you would share it with us. Email your story to corporatecommunications@methodisthospitals.org or call 219-886-5972.

Calendar of Classes

Cancer Risk Assessments

Free breast cancer and colon cancer risk assessments; bone density screening (heel scan). Includes education on ways to decrease cancer risks, methods of early cancer detection and information on bone health.

Methodist Hospitals Midlake Campus
2269 25th Ave, Gary • Noon to 2:00 p.m.

- November 3

Southlake Campus
8701 Broadway, Merrillville • 4:30 to 6:30 p.m.

- November 4

To register call 1-888-909-DOCS (3627).

Diabetes Support & Education Groups

A wide variety of topics related to diabetes are discussed. For persons with diabetes and their family members.

• **Methodist Hospitals Midlake Campus, Diabetes Center,**
2269 25th Ave, Gary

- Free. Classes meet the 4th. Tuesday of every month from 10 to 11:30 a.m. or 6 to 7:30 p.m.

To register call 219-944-4160.

Diabetes Self Management Education Classes

Comprehensive diabetes education involving all aspects of treatments as well as prevention of chronic complications. Classes are a total of 12 hours including follow up class.

Methodist Hospitals Midlake Campus, Diabetes Center,
2269 25th Ave, Gary

- Thursdays and Fridays - 9 a.m. to 3:30 p.m. (2 all day classes) or Mondays from 5 p.m. to 8:00 p.m. (3 Mondays in a row)
- Wednesday 9 a.m. to 12 p.m. (3 Mondays in a row).

To register call 219-944-4160. Must have physician referral.

Financial Services

No Insurance? Get HIP with Methodist.

Methodist Hospitals Financial Services will be enrolling applicants in state-funded insurance programs including the new Healthy Indiana Plan.

Every Wednesday and Thursday
from 2:00 p.m. to 4:00 p.m. at both campuses.

- **Methodist Hospitals Northlake Campus,**
600 Grant St., Gary
- **Methodist Hospitals Southlake Campus,**
8701 Broadway, Merrillville

Applicants should bring the following:

- Birth Certificate*
- Date of Birth*
- Immigration Status
- Proof of one month's income (30 days)
- Proof of income sources: court orders, etc.
- Receipt or Signed Verification of Any Childcare Paid in the Last 30 Days
- Valid Picture ID*

*Everyone in Household

Free Scoliosis Screenings

Southlake Campus, NeuroScience Institute,
200 E. 89th Ave, Merrillville

By appointment only. For information call 219-738-4926.

Healthy Back and Neck Seminars

The New Spine Care Center takes an innovative team-orientated approach to treatment. Identify your neck or back pain and learn about the most effective treatments available.

Southlake Campus, Center for Advanced Clinical Studies,
200 E. 89th Ave, Merrillville • 4:00 p.m.

- October 20
- October 27
- November 3
- November 10
- November 17
- November 24
- December 1
- December 8
- December 15
- December 22

To register call 1-888-909-DOCS (3627).

MS Support Group

A support group for friends and family of people with multiple sclerosis.

Southlake Campus, Center for Advanced Clinical Studies,
200 E. 89th Ave, Merrillville • 11:30 a.m. to 1:00 p.m.

- November 19
- December 17

For more information call 219-738-4926, no registration required.

Prepared Childbirth Classes

A five-week course to help pregnant mothers and their partners learn about labor, delivery and the immediate post partum period. Recommendation for attendance is 7 – 8 month of pregnancy.

Methodist Hospitals Midlake Campus,
2269 25th Ave, Gary • 6 to 8:30 p.m.

- November 9

Southlake Campus, Center for Advanced Clinical Studies,
200 E. 89th Ave, Merrillville • 6 to 9:00 p.m.

- October 20

To register call 1-888-909-DOCS (3627).

Rehabilitation Classes

Classes are free and take place at Methodist Hospitals Midlake Campus Gary.

Methodist Hospitals Midlake Campus,
2269 25th Ave, Gary • 12 noon

- **Back Education:** Held ever first Tuesday of the month
- **Fall Prevention:** Held every third Tuesday of January, March, May, July, September and November

To register call 1-888-909-DOCS (3627).

Sibling Classes

Classes are designed help to prepare children and their parents for a new family member.

\$15 per child; Free if parents are delivering at Methodist.

Methodist Hospitals Midlake Campus,
2269 25th Ave, Gary • 6 to 8:30 p.m.

- October 21

Southlake Campus, Center for Advanced Clinical Studies,
200 E. 89th Ave, Merrillville • 6 to 9:00 p.m.

- November 13

To register call 1-888-909-DOCS (3627).

Stroke Screenings

Free Stroke risk assessment and PAD Screenings: Blood Pressure and Carotid Bruit Check

Methodist Hospitals Midlake Campus,
2269 25th Ave, Gary • 12 to 2:00 p.m.

- December 7

Southlake Campus, Center for Advanced Clinical Studies,
200 E. 89th Ave, Merrillville • 4 to 6:00 p.m.

- November 2

To register call 1-888-909-DOCS (3627).

Weight Loss Surgery (Bariatric) Community Seminar

An informational seminar about Gastric Bypass Surgery and LapBand surgery.

The session is open to all interested persons and their families or friends. Call (219) 738-5617 for any questions.

Southlake Campus, ReStart Center, 101 E. 87th Ave,
Merrillville • 6 to 8:00 p.m.

- October 26
- November 10
- November 23
- December 8

To register call 1-888-909-DOCS (3627).

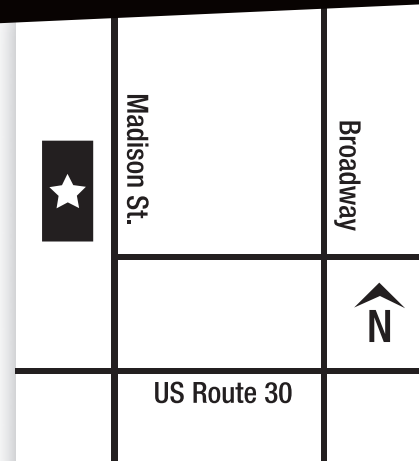




Methodist Fall Community Health Fair

Saturday, November 6, 2010
8:30 a.m. to 12:00 p.m.

Hellenic Cultural Center, 8000 Madison, Merrillville, IN 46410



Free Health Screenings

- Blood Pressure
- Blood Sugar*
- Cholesterol*
- Blood Oxygen Level
- Body Fat Analysis
- Bone Density
- PSA Screenings (Blood Test)
- Peripheral Vascular Disease
- Stroke Risk Assessment

Some tests are limited & are provided on a first come first serve basis.
 *12 hour fasting required

Free Health Information and Raffles

- Ask-A-Doctor
- Breast Health
- Cardiology
- Diabetes
- NeuroScience Institute
- Nutrition
- Oncology Institute
- Rehabilitation Service
- Volunteer Services
- Women's Services

Free Information from Healthcare Organizations

- Anthem Blue Cross and Blue Shield
- American Heart Association
- Community HealthNet
- Golden Living
- Healthy Start
- Home Instead
- Kaufmann Chiropractic
- Managed Health Services
- MD Wise
- Minority Organ Tissue Transplant Education Program
- Regency Hospitals
- Spring Mill Health Center



Let us help you find a physician who shares our commitment to quality care. Visit MethodistHospitals.org
 Or Call 1-888-909 DOCS (3627) to speak to a Methodist Hospitals representative.