

Health Reach

YOUR RESOURCE FOR WELLNESS

LISTEN TO YOUR HEART

Roslyn Delos Reyes thought she was doing everything right to stay healthy. “I was a good soldier when it came to my health,” says the 51-year-old Arlington resident. “I got regular checkups. I got my blood work and all my numbers were good. I took a step aerobics class three times a week.”

During easy warm-ups, she noticed a little pressure in her chest. “This happened at the very beginning of my workout, so I would muscle through it,” Roslyn says.

Over the course of a year, the pressure in her chest became more intense, even when walking at a brisk pace. She never got winded, and never felt dizzy during exercise, but she could feel that pressure. Then one day, she began sweating profusely even though she had just started to work out.

“It just didn’t feel right,” she says, “so I went to see my doctor. She did an EKG and it was normal, but just to be sure, she sent me for a stress test.”

Just a few minutes into the stress test, Roslyn felt the familiar pressure in her chest and began sweating. The test was stopped immediately. The results suggested a blockage in her heart and the doctor recommended a cardiac catheterization to find out what was going on. That test confirmed coronary artery disease. Specifically, Roslyn had a blocked artery that was too small for a stent.

Dr. Rachel Berger, Roslyn’s cardiologist, prescribed a beta blocker to protect her heart, a daily baby aspirin, nitroglycerin pills to keep her blood vessels dilated, and a statin for cholesterol. A prescribed statin is standard for anyone with coronary artery disease, even if—like Roslyn—her cholesterol isn’t high.

“It’s hard for a person to go from being on no medications, to then being on a cadre of new medicines,” Dr. Berger says. “But, these are the medicines that can help prevent future events. Roslyn was lucky we caught it when we did. She did not have a heart attack.”

Roslyn wasn’t happy about taking medication, but she knew she had to do it to stay healthy. She’s had no problems with side effects and says her “numbers are awesome.”

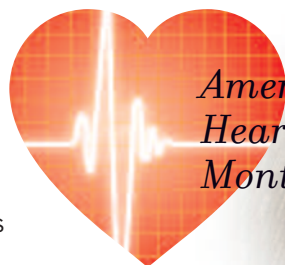
Besides the medication, Roslyn also worked with the nurse practitioner/nutritionist in Dr. Berger’s office to learn about a heart-healthy diet that is low in saturated (animal) fats, low in trans fats (processed foods), and high in fiber, fruits and vegetables.

“We stress the importance of cutting back on red meat, cheeses and portion size,” Dr. Berger says. “Being overweight in the U.S. is an epidemic. It leads to high blood pressure, diabetes and sleep apnea, all of which are linked to heart disease. I counsel my patients to get to their optimal weight. Many patients I see could lose some weight.”

(Continued on page 9)



FEBRUARY



*American
Heart
Month*

*Roslyn Delos Reyes
with her cardiologist,
Dr. Rachel Berger*

HAVING A BABY AT VIRGINIA HOSPITAL



Women & Infant Health Center lobby, 1701 N. George Mason Drive



Labor and Delivery room



New nursery

OB/GYNs want their patients to have the very best experience when it's time to deliver their babies: state-of-the-art medical technology, caring, compassionate and experienced nurses, and personalized attention—in a beautiful setting with private rooms. In short, physicians want to care for their patients at Virginia Hospital Center's newly renovated Women & Infant Health Center.

With warm colors, wood finishes and soft lighting, the Center is not only soothing, but also provides top-notch care with a high level of compassion and efficiency. The nurse's stations have easy access to all the rooms. The 16 labor rooms have the latest infant resuscitation equipment and fetal monitoring. Six new private triage rooms are available to confirm whether moms are in labor. Three new operating rooms solely for Cesarean-section deliveries are located right in the Labor and Delivery Unit. And, after delivery, an elaborate security system continually monitors where the babies are at all times.

But technology is just one reason that OB/GYNs are so happy with the new Women & Infant Health Center. Doctors praise how the nurses give patients their undivided attention. "The main reason I like this Hospital is the nursing staff," says OB/GYN Gwendolyn Cobbs, MD. "All the nurses in the Women & Infant Health Center—labor

and delivery, postpartum and NICU—are highly experienced and provide very personal care to our patients."

The high level collaboration amongst the multidisciplinary team of OB/GYNs, perinatologists, anesthesiologists, neonatologists, pediatricians, certified nurse midwives, nurses and lactation consultants leads to a collegial and efficient environment for staff and patients. "We have a high standard of medicine here," adds OB/GYN Mary Crowther, MBBS. "I feel very confident in the care delivered to our patients."

The family-centered model of care is evident everywhere. Moms can have as much family support as they want during labor and delivery. For moms who have C-sections, their babies are warmed right next to them in the recovery room. Mom can hold her baby right away and, if possible, even start nursing.

After delivery, every mom has a private room where her baby stays with her as much as possible. The baby's assessments and baths are done at her bedside. This step in the family-centered model keeps the family together and gives parents a chance to observe the nursing care delivered to the baby at the bedside. This step also enhances communication between the patient and nurse by creating an important dialogue inclusive of education

CENTER



All-private NICU suites

and proactive questions and answers. If mom needs a rest, the nursery is just a few steps away. If mom's partner needs a snack, coupons for complimentary meals and discounts in the Hospital's Food Court are provided.

Virginia Hospital Center's Level IIIB neonatal intensive care unit (NICU) can take care of even the smallest preemies. It is the area's only NICU with all-private patient suites. Parents can be with their babies as often and as long they want to, and each room has a sleeping chair for spending the night.

Communication and education are key. Lactation consultants help with breastfeeding questions and a discharge class covers clinical information and provides practical tips on what new parents need to know about caring for their new baby before they head home.

Having a baby is one of the most memorable experiences in a family's life. New parents want everything to be just right for their new little one. The staff at the Women & Infant Health Center feels exactly the same way. From the time moms first arrive in labor until they leave with their precious cargo, the staff is doing everything they can to make those first days together as a family just right. ■

If you have any questions or want more information about having your baby at Virginia Hospital Center, please call our special dedicated phone line at 703.558.1194.



Breastfeeding Support Group. For more support groups, see page 13.



Bedside nursing care and communication prepare mom for going home with baby.



Women & Infant Health Center nurses

IMAGE-GUIDED SPINAL SURGERY: GPS FOR THE SURGEON

Imagine a surgeon preparing to operate on a patient's damaged spine. A computer screen shows the structure of the patient's vertebrae in 3-D and in great detail. Using a technology similar to that used by GPS, the surgeon can see where the instruments are being placed and know that the angle and the depth are exactly what they should be. He sees precisely where to place instrumentation, such as screws, to optimize outcomes and reduce complications.

The technology is called image-guided spinal surgery. Neurosurgeon Charles J. Riedel, MD explains how it is revolutionizing how surgeons operate on the spine.

How does image-guided surgery work?

We position the patient on a standard spine table and attach a reference frame. This tells the computer where the spine is in space. Using the O-arm® imaging system, we perform a 360-degree scan of the operative area. The computer processes these images in three planes. It creates 3-D images of the patient's anatomy and displays them on a computer screen so we can see the spine from every perspective.

During surgery, we can manipulate these images to see exactly what we need to see. Specially designed instruments also are tracked by the computer. Every time we use an instrument, we know precisely where it's going. It will show us the angle where we are going in—before we do it. At the end of the surgery, it takes another picture, which shows exactly where our implants are and whether we have decompressed adequately.

How did it change how you perform spinal surgery?

It is a vast improvement. It allows us to see exactly where things are, where the area of compression is, where we are putting our instruments and where we're correcting alignment. For example, without this technology, when a surgeon puts in a pedicle screw, all that is seen is the entry point. Image guidance shows where the screw will go at its depth or throughout its course, which can be several inches deep. When thoracic pedicle screws are placed freehand, as many as 18 percent are in an incorrect position. That percentage approaches zero with this technology.

How long have you been performing image-guided spinal surgery?

I've been using image-guidance and intra-operative imaging for spinal surgery for about five years and my practice has done close to 1,000 cases. We have presented both nationally and internationally on our experience.

For what kinds of conditions and surgical procedures is it used?

Image-guided technology can be used for virtually any kind of spinal condition that can benefit from surgery, including certain types of tumors, infections, degenerative disease, trauma and deformity. It also is exceedingly useful in revision surgery where the anatomy has been disrupted from prior surgery.

What are the benefits to you as a surgeon?

Intra-operative imaging shows the anatomy real-time—as it is at the point of surgery. This is key because anatomy can shift between preoperative images and surgery. It is accurate within less than a millimeter, allowing for optimal placement of our instruments during surgery.

Without image-guided technology, 5 percent of patients required reoperation to revise hardware. Now, when the patient leaves the operating room, we know that the surgery was done correctly, the hardware was placed accurately and the area was decompressed. Image-guidance has increased the precision of the procedures we perform, minimizing the need for repeat surgeries.



Charles J. Riedel, MD

How does the patient benefit?

The precision of image-guidance is particularly beneficial when dealing with such a complex, delicate area as the spine. It has been shown to significantly reduce the risk of vascular and neurological injury, foot drops and other post-operative complications.

It is also making surgery an option for more patients. For certain operations of the upper cervical spine, anywhere from 6 to 12 percent of patients are ineligible for traditional spinal surgery. Almost all of them are surgical candidates with image-guided surgery.

What's the future of intra-operative imaging?

You can sail around the world by navigating the stars, but no one does. Why not use GPS? You can do spinal surgery just with your eyes, but why not use image-guided spinal surgery? It is more accurate, often faster and reduces complications. In 10 years, everyone will use image guidance. ■

TAKING ON KIDNEY STONES

When Victoria Peters went in for an X-ray of her kidney, she was anticipating a stone. Kidney stones can be as small as a grain of sand and often are the size of a pebble. It turns out, Peters' kidney stone was as big as a golf ball.

"It wasn't a stone," Peters says. "It actually was more like a boulder."

Peters had first gone to see urologist Andrew B. Joel, MD after her primary care physician found blood in her urine during an annual checkup and in three subsequent tests. She went online and researched area urologists.

"I compared doctors, their education, published papers and anything I could find," Peters said. "I selected Dr. Joel."

Kidney stones can produce excruciating pain. Typically, symptoms from kidney stones are a combination of pain, nausea, vomiting and chills, but sometimes, the only symptom may be blood in the urine. They can also result in new and irritating urinary problems, such as discomfort and urgency.

The vast majority of kidney stones are either calcium- or uric acid-based. Uric acid stones form because the kidney can't alkalize the urine (or make it less acidic) and are treated with medication. With calcium stones like Peters', doctors don't know why they form. "The cause may be genetics with diet and lifestyle factors," Dr. Joel says. Patients are advised to increase fluid intake, and limit sodium and animal protein.

Kidney stone treatment depends on several variables, including the size of the stone and the presence of infection.

"Our approach is to give the person a chance to pass the stone," Joel says. "If the person is having increasing bouts of pain or develops an infection, then we intervene."

The two primary treatments are shock wave lithotripsy and ureteroscopy. Shock wave lithotripsy uses shock waves outside the body to pulverize the stone; it then passes out of the body in the urine. Ureteroscopy is done under general anesthesia and a telescope or ureteroscope is inserted through the urethra into the bladder and kidney. Depending on size, the stone is removed in one piece or pulverized with a laser fiber.

For Peters' kidney stone, Joel chose percutaneous lithotripsy, a third, less-common procedure that involves inserting a needle and a telescope through her back directly into the kidney. The kidney stone was pulverized and removed. Peters stayed in the Hospital overnight.

About 50 percent of people who form one kidney stone will form more. Peters was one of them. Six months after her first treatment, she wound up in the Emergency Department at Virginia Hospital Center with excruciating pain. A CT scan showed a 2 mm stone. Initially, Dr. Joel prescribed medication for her pain with the hopes

that she would be able to pass the stone. After two weeks of cyclic pain and being unable to function at work, Peters was exhausted. Dr. Joel recommended a ureteroscopy.

For this outpatient procedure, Dr. Joel used the Hospital's newly installed UROSKOP Omnia cystoscopy table, the only one of its kind in the Mid-Atlantic region. It features high-definition technology and a flat-panel X-ray detector for superior clarity and greater image detail. Its larger field of view allows doctors to see both the kidney and bladder in one X-ray, resulting in less radiation exposure for the patient. The table also offers improved patient comfort; it can be lowered to make it easy for patients to get on and will accommodate up to 600 pounds.

"This takes us to a new level in urological surgery," Dr. Joel says. "Patient images from CT, MR and nuclear medicine are available at a glance to the urologist. Better diagnostics mean better treatment decisions."

That's certainly been the case for Peters, who has been fine since her second procedure. In hopes of preventing more stone formation, she drinks "lots of water" and is on a low-sodium, moderate-protein diet.

The experience actually has given her bragging rights of sorts. "Both my brothers have experienced kidney stones," she says. "They said I always have to outdo them—the kidney boulder!" ■

NEED A UROLOGIST?

To schedule an appointment with Dr. Joel or one of his partners, Dr. Robert Mordkin or Dr. Gregory Bernstein, call 703.717.4200.

Washington Urology has two office locations—in Arlington and McLean.

www.washingtonurology.com

L-R: Dr. Gregory Bernstein, Dr. Robert Mordkin and Dr. Andrew Joel



OPEN BORE MRI: A POWERFUL NEW IMAGING OPTION

Magnetic resonance imaging (MRI) is a powerful tool for diagnosing injuries and illness. On March 1, Virginia Hospital Center will debut the use of an open bore 3 Tesla (3T) MRI, the newest, most advanced MRI available. Radiologists Ivan Petrovitch, MD and Michael Staloch, MD explain how physicians use MRI and the benefits of open bore MRI.

Q. What is MRI and how is it used in diagnostics?

A. MRI uses a powerful magnet and radio waves to obtain detailed images of the soft tissues—organs, muscles, veins and nerves—in the body. It is the most advanced imaging that we offer and it is a safe diagnostic tool. There are no known side effects because there is no radiation.

MRI is used to diagnose tumors, infection, neurological conditions and orthopedic injuries, and can be used to image virtually any part of the body. MRI of the heart can identify structural abnormalities, such as aneurysms, and can visualize physiologic abnormalities such as heart valve disease and heart failure. MRI can also be used for dynamic imaging to monitor blood flow to the brain and liver, as well as evaluate the contractions of the small bowel and the muscles of the pelvic floor.

Q. Who interprets MRI results?

A. At Virginia Hospital Center, MRIs are read by fellowship-trained subspecialty radiologists. Our radiologists have been trained at prestigious academic centers including University of California San Francisco, Stanford University, the Johns Hopkins University, Massachusetts General Hospital, and the University of Maryland. The radiologists work closely with your doctor to make sure you get accurate and timely results to provide you with the best care.

Q. What is it like to have an MRI?

A. Many patients find an MRI to be a relaxing experience and may even take a nap. During an MRI, the patient lies down on a padded table and is positioned so that the part of the body to be scanned is in the center of the magnet. Each exam takes about 30 minutes and the patient must lie completely still during the imaging.

Q. How does the staff make an MRI exam comfortable for patients?

A. Since all MRIs make noise during the examination, we provide our patients with earplugs or they can listen to music on our sound system or their own iPods or CDs. They will still hear the MRI sounds, but not as loudly.

We know that the exam room can be chilly, so we offer all patients warm blankets. Most importantly, we stay in constant communication with the patient. At all times



PHOTO COURTESY OF SIEMENS

during the MRI, we talk to patients and can hear them. There also is a call button for patients to press if they need us right away.

Q. How does an open bore MRI compare to a standard MRI?

A. It offers faster exams, more patient comfort and sharper images. An open bore MRI is a tube that is much wider in diameter compared with a standard MRI. The larger diameter is more comfortable for the patient and results in less claustrophobia. The larger bore can also accommodate larger patients, up to 550 pounds.

Q. Can patients request open bore MRI?

A. MRI and open bore MRI are both outstanding diagnostic tools. The radiology team will tailor the exam to the appropriate machine to meet the individual needs of each patient.

Q. How do I schedule an MRI appointment?

A. MRI appointments are available seven days a week by calling 703.558.8500. Please have your physician referral and insurance information available when you call. The appointment scheduler may ask you some preliminary questions prior to booking your appointment. ■

PARDON OUR DUST

The construction of the new open bore MRI suite will take place in January and February. Thank you for your patience as we install this new MRI to better serve our patients.

ENDOVASCULAR NEUROSURGERY GIVES YOUNG STROKE PATIENT A NEW LEASE ON LIFE

Elaine Parnarouskis was sitting down to breakfast with her mother on a Caribbean cruise when she suddenly felt weakness in her arms and legs and numbness in her face. “I was talking funny and my mouth was drooping on one side,” she recalls. “I couldn’t cut my food.”

Parnarouskis, 40, went to see the ship’s doctor. After an evaluation, Elaine was told she had a transient ischemic attack, or TIA.

A TIA is a powerful symptom that should never be ignored, explains Dr. Sid Chandela, endovascular neurosurgeon and Director of Neurovascular Surgery at Virginia Hospital Center. “It’s like a mini or warning stroke,” he says. “Small strokes are a harbinger for a large, devastating stroke.”

Parnarouskis took it seriously enough to interrupt her vacation. When her ship arrived at the island of St. Maarten, she was escorted from the ship to a hospital. “By this time, my symptoms had gone away,” she says. “I was evaluated at the hospital and they gave me a CT scan, but couldn’t find anything wrong.”

Once home in Manassas, she followed up with her primary care physician. Eight days after her first TIA on the cruise ship, she had another one at work.

“I felt a little funny, so I went to lie down,” Parnarouskis says. “Both my arms and legs felt weak and my voice was funny. I was rushed to the hospital.”

Parnarouskis was admitted to Virginia Hospital Center where she had a complete stroke work-up under Dr. Chandela’s care. While she had a history of high cholesterol, she did not have high blood pressure. An MRI revealed that one of the main blood vessels in her brain was 75 percent blocked.

For many patients who have had a TIA, medication is the best therapy. But medication wasn’t working for Parnarouskis. Because of her previous attacks and a family history of stroke (her mother had a stroke in her 60’s), she was at high risk for having a major stroke, especially at her young age. Dr. Chandela recommended that she undergo an endovascular procedure to inflate a balloon and place a stent to open up the blood vessel in her brain.

“Stenting is relatively new and is the most aggressive treatment for long-term stroke risk reduction,” Dr. Chandela explains. “However, it is only appropriate to use after medical therapy has proven unsuccessful for the patient. In Elaine’s case, she was young and she had recurrent symptoms. This offered her a better alternative than purely just being on medication. She was definitely a candidate for a stent.”

Instead of making an incision through the skull into the brain, the endovascular approach is minimally

invasive. A tiny catheter is inserted into the femoral artery in the groin and navigated using fluoroscopic X-ray imaging as a guide. Dr. Chandela threads the catheter past the chest and into the brain. By entering through the arteries, he can reach the deepest part of the brain without damaging healthy brain tissue. A balloon is inflated to expand the blocked blood vessel and then he places the stent, a metal scaffolding that keeps the blood vessel open.

“Just like a cardiologist who goes in and puts in a stent in a blood vessel to open up circulation to the heart, I do the same thing to re-establish blood flow in a brain vessel,” Dr. Chandela says.

After Dr. Chandela explained the available options to her, Parnarouskis decided that the stent was the best course of treatment for her. Two days after her surgery, she was released from the Hospital. A week later, she was back at work. The only medication she takes now related to her TIA is aspirin.

Six months after her surgery, Parnarouskis continues to be symptom-free. Dr. Chandela followed up with a cerebral angiogram which demonstrated that the stent is open and preserving blood flow. From now on, he’ll see her once a year for a check-up.

“Everything is looking good,” Parnarouskis says. “I feel great, like it never happened.” ■

Elaine Parnarouskis with her daughters, Lindsey (left) and Haley





Community Events

HAPPY HEARTS: A HEART HEALTH EVENT FOR WOMEN ONLY

SATURDAY, FEBRUARY 4, 9:30 – 11:00 AM

John T. Hazel, MD Conference Center. Free parking in Blue parking.

Handicapped parking is available in front of the John T. Hazel, MD Conference Center

- ◆ **DOORS OPEN AT 9:00 AM**
- ◆ **PANEL BEGINS AT 9:30 AM**
- ◆ **CALL 703.558.6848 TO REGISTER**

At this special event, learn how small changes can make a big difference. Join cardiologist Dr. Rachel Berger as she discusses how you can prevent, manage and beat heart disease. A registered dietician gives tips on portion control and making healthy choices at the grocery store. A fitness expert demonstrates how to lose weight. A massage therapist explains how to live stress free.



The American Heart Association recommends keeping a food intake log that includes listing all the food and beverages consumed throughout the day. Attendees will receive this FREE journal to track daily diet in order to get on track to a heart healthy lifestyle!

Heart Saver CPR

The American Heart Association Heart Saver CPR Course explains how to give CPR in a safe, timely & effective manner to an adult, child or infant. This class is recommended for expectant parents, new parents and grandparents. Online registration only—please visit www.virginiahospitalcenter.com. If you have any questions, please contact Jeanne Hanes at 703.558.5289.



Friday, 5:00 – 9:00 pm
1/13, 2/10 or 3/9
Saturday, 1:00 – 5:00 pm
1/28, 2/18 or 3/3
(C) \$60 per person

Total Joint Replacement Class

If you are considering, or scheduled for, total knee or hip joint replacement, we encourage you to attend our free class. Learn about pre-operative testing, what to expect during your Hospital stay and discharge planning options. To register, call 703.558.6159.

1st & 3rd Wednesday of every month
1:00 – 4:00 pm
1st Wednesday of every month
6:00 – 8:00 pm
Arlington Urgent Care Center
Carlin Springs Health Pavilion
601 S. Carlin Springs Road
Arlington, VA 22204

Weight Loss Surgery Free Seminars

Learn about weight loss surgery options, such as gastric banding and sleeve gastrectomy, and how they can help you take charge of your weight and your health. To register, call 703.717.4250 or visit www.surgicalassociatesvhc.com.



Saturdays, 10:00 – 11:30 am, 1/7, 2/4, 3/3, 4/7
Thursdays, 6:00 – 7:30 pm, 1/19, 2/16, 3/15, 4/19





Cardiology

Heart Health Tips

Some of the risk factors for heart disease, like heredity, can't be changed. But there are plenty of things everyone can do to reduce their risk:

Know Your Family History and Risk Factors



If you have a sister or mother diagnosed with heart disease before the age of 65, or a father or brother diagnosed before the age of 55, you should talk with your doctor about appropriate screening. Other risk factors include smoking, being overweight, diabetes and sleep apnea. Get your blood pressure and cholesterol checked regularly.

Get Moving!



Exercise is a key component of good heart health. The American Heart Association recommends a minimum of 30 minutes of moderate aerobic exercise four to five times a week. "If you don't have 30 minutes, split it up into two 15-minute segments," says John Golden, MD, Chief of Cardiology at Kaiser Permanente in Northern Virginia. "That can still be a significant benefit to your health."

Get your heart rate up and sustain it. For those with joint problems or arthritis, water exercise is particularly beneficial.

"Duration is more important than intensity," Dr. Golden adds. "Start at a comfortable pace and build up as your aerobic capacity improves. Climbing stairs, household chores, and yard work all count."

Adopt a Heart-Healthy Diet



Strive for a diet that's high in fiber and includes fruits, vegetables, fish, chicken, tofu and whole grains (brown over white). Don't drink your calories—drink water instead of juice and sodas.

Try to maintain as much control of your diet as possible. "A lot of people say, 'I get hungry so I eat whatever is available,'" Dr. Golden suggests. "Instead, travel with healthy snacks, like nuts and dried fruit."

If you need more help, talk to a nutritionist. Your doctor can recommend one.

Stop Smoking



Smoking is one of the biggest heart disease risk factors, and it's particularly strong for women. It can be very hard to quit; your doctor can recommend smoking cessation programs. No matter how long you have been a smoker, quitting will make a difference and dramatically reduce your ongoing risk. "Those differences can be seen even within a year of not smoking," says Dr. Golden.

Make a Commitment and Make It Manageable

Many people find making the changes to get heart healthy overwhelming. "Set short-term achievable goals and make gradual changes," Dr. Golden says. "When a patient says, 'I'll lose 25 pounds by the next time I see you,' I say, 'Let's focus on the first five.'" ■

LISTEN TO YOUR HEART

(Continued from page 1)

At the time of her coronary artery disease diagnosis, Roslyn was exercising regularly. She continues to take step aerobics three times a week and has now added a yoga class. Dr. Berger recommends 30 minutes of moderate aerobic activity at least four to five times a week.

"Moderate aerobic activity can be walking, biking, swimming, Zumba—anything—but it must get your heart rate up," Dr. Berger says. "Getting your heart rate up means working up a healthy sweat and feeling some fatigue after you're done exercising."

Since her diagnosis, Roslyn has worked closely with Dr. Berger and her staff.

"I like living, so I'm going to do what I'm told!" she says. She's had no further symptoms since she started taking her medication two years ago and made the lifestyle changes her doctor recommended. She now counsels her daughter and her younger co-workers to take care of themselves.

"This was a wake-up call," says Roslyn. "I was active and my numbers were good, yet my body said otherwise. You have to listen to your body!"

That is excellent advice, Dr. Berger agrees. Heart disease is the number one killer among women, and it can present in different ways from the typical symptoms in men. In women, the symptoms often include shortness of breath, fatigue, nausea, and "just not feeling right."

"It's important to recognize your own symptoms and when you're not feeling right, seek medical attention," Dr. Berger advises. "You know your body best, and you know when something is wrong. It may be hard for you to pinpoint the problem so be your own advocate and schedule an appointment with your doctor. Like Roslyn says, you have to listen to your body." ■





Oncology

Ask Your Doctor About Colorectal Cancer Screening

Colorectal cancer is the third most common cancer. It is 90 percent curable if it's found early. Yet sadly, a recent nationwide poll* found that 31 percent of men and women 50 years and older have never been screened for colon cancer by standard screening methods such as a colonoscopy, fecal occult blood test or fecal immunochemical test.

The top reasons respondents cited for not being screened were: healthcare provider didn't recommend being screened (28%); too busy or time constraints (18%); and fear (16%).

"It's important for patients to take ownership of their health and have a conversation with their doctor about colorectal cancer screening," says internist Sam Pappas, MD. "If you're 50 or older and your doctor hasn't mentioned it, you need to bring it up. That conversation should include your family history of colorectal cancer, as this can affect when and how often you are screened."

The best time to talk to your doctor about a screening is during an annual preventive exam, Dr. Pappas notes. Those preventive health visits should take place every one to two years for people once they reach their 50's.

"You want to see your doctor for blood pressure and cholesterol control, weight management and to make sure that you're having the appropriate health screenings—your health can change much more frequently when you're in your 50's," he says. "Be proactive and plan for success in your health."

People who say they're too busy to get a colonoscopy often mistakenly believe that the procedure requires a week of recuperation.

"It's one day and it can save your life. You do the prep the night before. The procedure itself takes 30 minutes tops," says Othon Wiltz, MD, colorectal cancer surgeon. "99.9 percent of people go back to work the next day."

"Fear is a big deal and keeps many people from being screened," Dr. Wiltz explains. People most often are afraid of:

The preparation for the screening. The preparation for a colonoscopy is easier now than it used to be and typically involves taking four tablets and drinking two small bottles of liquid. "There's no excuse not to have a colonoscopy because of the prep," says Dr. Wiltz.

The unknown about the procedure. They think it will hurt. It doesn't. Chances are, you won't remember a thing about the procedure itself.

Having anesthesia. This is to make the procedure comfortable and pain free. Afterwards, you may feel a little tired. You will need someone to drive you home afterward.

What the screening will find. "This is what they think: I prefer to die if I have to have a (colostomy) bag," Dr. Wiltz says. "The key is to find the cancer early."

Many people also say they haven't had a colonoscopy because they didn't know they needed to be screened. Everyone needs to be screened because colorectal cancer affects men and women equally and African Americans are at greater risk than any other ethnic group. "The only reason you don't get a colonoscopy is if you don't have a colon," Dr. Wiltz says.

To schedule an appointment with Dr. Wiltz or his partner, Dr. Jennifer McQuade, contact Washington Colorectal Surgery at 703.717.4180. ■

WHEN TO HAVE YOUR FIRST SCREENING COLONOSCOPY

AGE 50: Individuals with no family history of colorectal cancer or polyps.

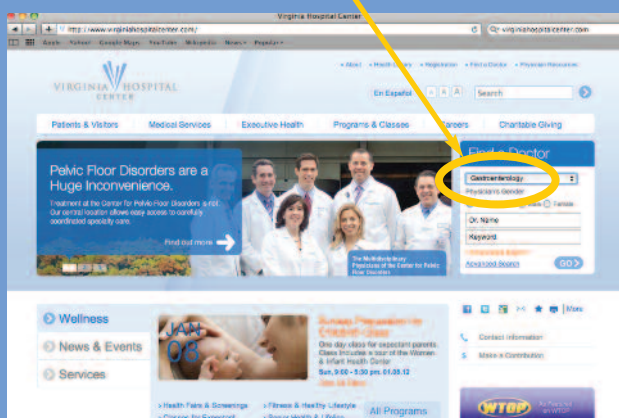
Age 45: African Americans with no known risk factors.

Age 40 or Younger: Individuals with a first-degree relative (parent, sibling, child) who was diagnosed with colorectal cancer before age 60 or individuals with two first-degree relatives diagnosed at any age should be screened at age 40 or 10 years before the youngest relative's diagnosis—whichever comes first.

Age 40 or Younger: Women diagnosed with breast, uterine or ovarian cancer should talk with their doctor about having a screening colonoscopy at the time of their diagnosis.

NEED A COLONOSCOPY?

Go to "Find a Doctor" on www.virginiahospitalcenter.com. Select Primary Care or Gastroenterology.



All lectures and events are held in the Community Classroom of the Cancer Resource Center in the Rose Benté Lee Ostapenko Outpatient Oncology Center unless otherwise noted. Please use Green Parking. To register for these free programs, visit www.virginiahospitalcenter.com or call the number indicated. For more information, call 703.558.5555.

SUPPORT GROUPS

Support groups are held in the Group Room of the Cancer Resource Center unless otherwise noted.

Winter Lectures & Events

Pre-Operative Class for Breast Surgery Patients

Jean Sullivan, RN, BSN, Breast Health Coordinator, reviews surgical procedures. To register, call 703.558.6908.

Thursdays, 1/12, 2/9, 3/8 or 4/12
6:00 – 7:00 pm

Lymphedema Awareness

Learn about lymphedema from certified lymphedema specialists. To register, call 703.558.0911.

Thursday, 1/12 or 3/8, 5:00 – 6:00 pm
Friday, 2/10 or 4/13, 11:00 am – 12:00 pm

Millinery Magic

Watch milliner Kate Pernia block a thrift store hat, transforming it into a brand new cloche style. Find out your head size & try on various styles to see what is most flattering for your face. Practice millinery techniques for trimming hats. To register, call 703.558.0915.

Tuesday, 1/31, 7:00 – 8:00 pm

Look Good, Feel Better

Learn makeup & hair styling techniques to help manage changes in appearance that may occur during cancer treatment. To register, call 703.558.5555. Group Room.

Mondays, 2/6 or 4/2, 2:00 – 4:00 pm

Tai Chi

Jimmy Kay, a Tai Chi instructor, teaches four Tai Chi classes for cancer patients. To register, call 703.558.0908.

Mondays, 2/6, 2/13, 2/20, & 2/27
7:00 – 8:00 pm

Bereavement Workshop

Receive information & emotional support for grieving the loss of a loved one at this 6-week workshop facilitated by a Palliative Care nurse & a social worker. To register, call 703.558.0901.

Thursdays, 3/1, 3/8, 3/15, 3/22, 3/29 & 4/5
6:30 – 8:30 pm

Relaxation & Guided Imagery

Laura Chalkley teaches a powerful mind-body technique to enhance the body's natural healing abilities. To register, call 703.558.0913.

Wednesday, 2/22, 7:00 – 8:00 pm

Current Options in Breast Reconstruction

Dr. Mazen Bedri, reconstructive surgeon, will discuss the most current options for reconstruction, including implants and autologous tissue transplants such as DIEP, TRAM & TUG. To register, call 703.558.0920.

Tuesday, 3/13, 7:00 – 8:00 pm

Yoga

Loretta DiGennaro, certified yoga instructor, teaches how yoga can relieve stress caused by a diagnosis of cancer. To register, call 703.558.0918.

Wednesday, 3/21, 7:00 – 8:00 pm

Healing & Renewal through Centering Prayer

Edward Bauman, chaplain, shows how contemplative prayer can be a source of healing renewal. To register, call 703.558.0909.

Wednesday, 3/28, 7:00 – 8:00 pm

Managing Fatigue

Paulette Komarny, RN, OCN, radiation oncology nurse, explores how to manage cancer-related fatigue. To register, call 703.558.0910.

Wednesday, 4/11, 7:00 – 8:00 pm

Know Your Blood Counts

Dr. Thomas Butler, medical oncologist, explains how to interpret lab results. To register, call 703.558.0914.

Tuesday, 4/17, 7:00 – 8:00 pm

First Sarcoma Survivorship Gathering

Calling all sarcoma survivors and their families! Ewing's sarcoma survivor & author Ben Rubenstein will be our inspirational speaker and Dr. Felasfa Wodajo, orthopedic oncologist, gives a research update. Dinner will be served. To register, call 703.558.0917.

Thursday, 4/19, 6:30 – 8:30 pm

C.H.A.N.C.E. Head & Neck Cancer

Oncology professionals discuss special challenges & concerns for anyone diagnosed with head & neck cancer.

4th Wednesday / 6:00 – 7:30 pm
Cancer Resource Library

Breast Cancer Patients with Children

Join other mothers to discuss living with a breast cancer diagnosis & raising a family.

4th Friday / 1:00 – 2:30 pm

Support Sisters Early Stage Breast Cancer

Women share concerns & learn new coping techniques.

1st & 3rd Tuesdays / 5:00 – 6:30 pm

Write Away Group

Patients share their writings about cancer diagnosis. Call 703.558.6913 for dates & times.

Healing through Art

Learn how to use art to cope with cancer diagnosis. To register, call 703.558.6913.

3rd Wednesday / 7:00 – 8:00 pm

Prostate Cancer

Discussion group for men & their significant others.

4th Tuesday / 7:00 – 8:30 pm

Reiki

Enjoy a free half-hour of Reiki. By appointment only. Call 703.558.6284.

2nd Friday / 7:00 – 9:00 pm





Women & Infant Health

Bringing Home Baby: Practical Advice for Parents

You've gone to childbirth classes. You've been reading up on parenting. The nursery is painted and the crib is all set up. Your bag is packed for the Hospital. But, what happens *after* your baby comes home? Have you thought about what kind of help you'll really need? A little advance planning can help during the first month or two. Here's some practical advice from the Women & Infant Health Center experts at Virginia Hospital Center.

Simplify Household Chores

Save steps for yourself. Keep a basket on each level of your house with diapers and basic supplies, such as burp cloths, a clean receiving blanket, a clean baby outfit—and a clean shirt for you.

Cook ahead. Whether your mother is staying with you or you're doing your own cooking, freeze meals for the future. Ditto with meals that friends bring over.

Know your physical limitations.

Depending on the type of delivery you had, you might not be able to lift for several weeks. Think about the layout of your house, and line up help for lifting and carrying heavy items like laundry baskets.



Go easy on yourself. Don't stress. Accept that your daily routine will change. If you and your family are eating takeout more often than usual, that's fine. If your older child has a bake sale, it's OK to buy cookies. Take it easy and enjoy this time with your baby.

Let People Help You

Have Mom come visit when it's best for you. An out-of-town grandmother might want to visit when you first come home from the hospital. But, you might need her help more after Dad goes back to work. Or you may want to be alone with your baby first. Think about what you want.

Accept help graciously. You have one job: taking care of your baby and yourself. Have family, friends, neighbors, co-workers—anyone who wants to help out—do everything else. That includes walking the dog.



Be selective about visitors during the first month. The folks you want around those first few weeks are those who don't mind doing some dishes or making dinner while you grab a nap.

Keep some cash on hand and a list of what you need from the store. When a neighbor offers to pick up something for you from the grocery store, you'll know what you need and be able to pay for it. Keep an envelope with \$30 in \$10 bills.

Unrival Siblings

Have a gift from the baby for the sibling. Put it in the crib in the Hospital and when the sibling comes in, say, "Look what the baby gave you!"

Make sure visitors acknowledge older children first. Ask visitors to really pay attention to them and tell them how special it is to be a big brother or sister. If the sibling is old enough, ask her if she would like to introduce visitors to the baby.

Foster the connection from the very beginning. Babies are naturally drawn to children. Point out how the baby's body language changes—smiling, kicking, waving his arms—when your older child comes near.

Involve siblings as much as is appropriate. A two-year-old can hand you a diaper or a blanket, rest his hand on the baby's back while you're breast feeding or sing the baby a song.

Plan special outings just for siblings. Set up an activity with Daddy or a grandparent in advance—and talk it up. When you're able to leave the baby for a bit, do something special with your older child by yourself.

Take Care of Yourself

You need a peer group. Being a new mom can be isolating, especially when the company drops off. Get out of the house and meet other moms. Take advantage of the breastfeeding support group and the baby yoga classes at Virginia Hospital Center.



Take a walk. Fresh air is good for you and the baby. Don't be afraid to go outside even when it's cold. A walk in the stroller might lull the baby to sleep.

Find a friend with an older baby. This helps you see that, eventually, you too will be able to shower two days in a row!

Breastfeeding help is just a phone call away. The lactation consultants at Virginia Hospital Center are available to help you after you go home. If you have questions, call 703.558.5444 and they will call you back. ■

A special acknowledgement to the medical experts who were interviewed for this article: Eileen M. Andreoli, MSN, RN, Associate Vice President of Patient Care Services; Dena McCoy, MSN, RNC, Patient Care Director, Mother Baby Unit; and OB/GYNs Patricia Bannon, MD and Gwendolyn Cobbs, MD.



Childbirth Education Classes

Preparation for Childbirth (6-Week Class)

This 6-session class for expectant parents covers pregnancy through the postpartum period, including nutrition; breathing & relaxation techniques; Cesarean deliveries; medication during labor; signs of labor; postpartum changes. Includes infant care skills & a tour of the Women & Infant Health Center.

Mondays, 1/9 – 2/13, 2/27 – 4/2 or 4/16 – 5/21
Tuesdays, 1/10 – 2/14, 2/28 – 4/3 or 4/17 – 5/22
Wednesdays, 1/11 – 2/15, 2/29 – 4/4 or 4/18 – 5/23
7:30 – 9:30 pm (C) \$180

One Day Preparation for Childbirth Class

This one-day class for expectant parents covers pregnancy through the postpartum period, including nutrition; breathing & relaxation techniques; Cesarean deliveries; medication during labor; signs of labor; postpartum changes. Tour the Women & Infant Health Center.

Sundays, 2/12, 3/11 or 4/15
Saturdays, 2/25, 3/24 or 4/28
9:00 am – 5:30 pm (C) \$165

Infant Care Skills: The First Two Weeks

Learn what to expect & how to care for your newborn during the first 2 weeks. Topics include when to call the pediatrician, infant safety, sleep, diapering, swaddling & how to bathe until the umbilical cord comes off. Class includes a lecture by a pediatrician.

2/23 or 4/26 7:00 – 9:30 pm (C) \$60

Sibling Class

The sibling class helps children, ages 2-6, adjust to their mothers' stay in the Hospital and the addition of a new sibling. Children have an opportunity to properly hold & diaper a life-like doll & tour the Postpartum Unit & Nursery.

Saturdays, 1/14, 2/11, 3/10 or 4/14
9:30 am for 2-3 years or 10:30 am for 4-6 years
(L) \$30

Hospital Tour for Expectant Parents

Tours of Labor, Delivery & Recovery, Nursery & Postpartum Units are offered for adults only. Registration required.

Sundays, 1/8, 1/22, 1/29, 2/5, 2/12, 2/26, 3/4, 3/11, 3/25, 4/1, 4/15, 4/22 or 4/29
2:00, 2:45 & 3:30 pm (L) FREE

Breastfeeding 101

Prepares expectant parents for a successful breastfeeding journey. Topics include holding & feeding your baby, supporting the breastfeeding mom & pumping basics. Partners encouraged to attend.

1/26, 2/6, 3/22 or 4/2 7:00 – 9:30 pm (C) \$60

Support Groups

Breastfeeding Support Group

While breastfeeding is a natural process, it can be challenging. Led by a board-certified lactation consultant, this popular group provides encouragement to breastfeeding and pumping moms. A baby scale is available. Registration requested.

Wednesdays, 12:00 – 1:30 pm (L) FREE

Breastfeeding Support Group for the Working Mom

Working moms share strategies for breastfeeding success while balancing the demands of pumping, motherhood and work. Moms are encouraged to attend before returning to work. A RN-IBCLC moderates. Babies welcome. Registration requested.

Sundays, 1/8, 1/22, 2/5, 2/19, 3/4, 3/18 4/1 & 4/15
7:00 – 8:30 pm (L) FREE

New Parents Support Group

Join other new parents to share your parenting experiences. Babies welcome! Registration is required.

Wednesdays, 1/18, 2/1, 2/15, 3/7, 3/21, 4/4, 4/18
10:30 am – 12:00 pm (L) FREE

Postpartum Support Group

Talk with other new mothers who are finding the postpartum weeks overwhelming. If you are feeling sad, anxious, angry or irritable, group support can help. Babies welcome! Registration is required.

Wednesdays, 1/11, 1/25, 2/8, 2/22, 3/14, 3/28, 4/11, 4/25
10:30 am – 12:00 pm (L) FREE



SIGN UP FOR CHILDBIRTH EDUCATION CLASSES IN YOUR FIRST THROUGH FOURTH MONTH OF PREGNANCY

To register, visit www.virginiahospitalcenter.com or call 703.558.2468.

CLASS LOCATIONS

(C) = John T. Hazel, MD Conference Center

(L) = Women & Infant Health Lobby Classroom, 1701 N. George Mason Drive

Prenatal & Postnatal Massage/Acupuncture

Specially-trained massage therapists & acupuncturists support you throughout your pregnancy from conception to labor & delivery, & after your baby has arrived.

Services are available in the Teal Center's suite located on the Hospital's campus, at the bedside in your private patient room, & also during labor & delivery. For an appointment, call 703.558.5454.



Health Promotion

To register, please fill out the registration form or visit www.virginiahospitalcenter.com and click on "Programs & Classes".

ALL SESSIONS ARE 6 WEEKS UNLESS OTHERWISE NOTED. For more information on Health Promotion classes, call 703.558.6740.

Body Sculpting

Tone your upper, lower body & abs using a variety of fitness tools. All levels are welcome.

Mon 6:00 – 6:45 pm begins 1/23 & 3/19 (H)

Tues 6:30 – 7:15 pm begins 1/24 & 3/20 (H)

Wed 6:00 – 6:45 pm begins 1/25 & 3/21 (H)

Sat 9:00 – 9:45 am begins 1/28 & 3/24 (CS)

Sat 10:00 – 10:45 am begins 1/28 & 3/24 (CS)
\$42

Cardio Strength Circuit

A faster paced cardio & strength training class for those with an intermediate fitness level.

Tues 5:30 – 6:15 pm begins 1/24 & 3/20 (H) \$42

Gentle Yoga

Restore flexibility, regain strength & ease tensions.

Tues 9:30 – 11:00 am begins 1/24 & 3/20

Thurs 9:30 – 11:00 am begins 1/26 & 3/22

(CS) \$66

Adaptive/Seated Yoga

For older or physically challenged adults with limited mobility, chronic pain, or neuropathy. Adaptive yoga emphasizes breathing, gentle stretching and going at your own pace. All ages and ability levels welcome.

Tues 11:15 am – 12:15 pm begins 1/24 & 3/20

(CS) \$66



Yoga for Everybody

This traditional approach to yoga reduces stress & increases strength & flexibility.

Wed 6:30 – 8:00 pm begins 1/25 & 3/21

(CS) \$66

Hatha Yoga

Tues 12:00 – 1:00 pm begins 1/24 & 3/20

Thurs 6:00 – 7:15 pm begins 1/26 & 3/22

(H) \$66

Hatha Vinyasa Yoga

Energetic, flow yoga class that matches breath to pose. Intermediate level.

Sun 10:00 – 11:15 am begins 1/29 & 3/25

(H) \$66

Prenatal Yoga

Stretch muscle groups essential for efficient labor & delivery. Physician approval required.

Mon 11:30 am – 12:45 pm

begins 1/23 & 3/19 **NEW!**

Mon 7:00 – 8:15 pm begins 1/23 & 3/19 (H)

Tues 6:15 – 7:30 pm begins 1/24 & 3/20 (CS)

Tues 7:30 – 8:45 pm begins 1/24 & 3/20 (H)

Wed 7:00 – 8:15 pm begins 1/25 & 3/21 (H)

Thurs 7:30 – 8:45 pm begins 1/26 & 3/22 (CS)

Sat 10:15 – 11:30 am begins 1/28 & 3/24 (H)

Sun 11:30 am – 12:45 pm begins 1/29 & 3/25 (H)

\$78

Prenatal Partner Yoga

Learn support techniques & restorative postures designed to help with the discomforts of pregnancy & labor. Physician approval required. *1 session.

Sun 2/12 or 3/4 1:00 – 2:30 pm (H) \$40/couple

Postpartum Yoga

Rebuild strength as you bond with baby (age 6-weeks to almost crawling). Yoga is for mom, but babies are incorporated into the class.

Tues 11:00 – 11:45 am begins 1/24 & 3/20

(H) \$78

Baby Yoga

Learn how to support & soothe your baby through yoga and other activities (caregiver & babies 6-weeks to almost crawling).

Fri 10:00 – 10:45 am begins 1/27 & 3/23

Sat 2:30 – 3:15 pm begins 1/28 & 3/24

(H) \$78

Tots Yoga

Fun-loving yoga class for caregiver & toddler (active crawling to 24 months).

Mon 10:00 – 10:45 am begins 1/23 & 3/19

Sat 3:30 – 4:15 pm begins 1/28 & 3/24

(H) \$78

Gentle Pilates

A non-traditional mat Pilates class with modifications to suit all abilities.

Sat 9:00 – 10:00 am begins 1/28 & 3/24

Sat 11:35 am – 12:35 pm begins 1/28 & 3/24

(H) \$78

Pilates

A mat-based class to balance your body by strengthening core muscles that support the spine.

Mon 7:30 – 8:30 pm begins 1/23 & 3/19 (CS) \$78

Pilates Plus

A fun, challenging Pilates mat class incorporating the use of bands and other equipment for added resistance while performing classic Pilates exercises.

Mon 6:15 – 7:15 pm begins 1/23 & 3/19 (CS) \$78

Pi-Yo

Tone & energize with this blend of Pilates strengthening & Yoga movement. Classes may incorporate stability balls & other equipment to enhance your core strength.

Tues 7:30 – 8:30 pm begins 1/24 & 3/20 (CS)

Thurs 7:30 – 8:30 pm begins 1/26 & 3/22 (H)

\$78

Postpartum Pilates

Get back into shape after childbirth! Class is designed for mom & baby.

Mon 11:00 – 11:45 am begins 1/23 & 3/19

Fri 11:00 – 11:45 pm begins 1/27 & 3/23

(H) \$78

Tai Chi

Slow, flowing movements help foster a balanced mind & body. Class follows the simplified, 24-form Yang style. Suitable for all ages. *8-week session.

Thurs 6:15 – 7:15 pm begins 2/2 (CS) \$80

Beat the Winter Blues

Learn how yoga & meditation can help you have a happier winter season.

*1 session.

Sat 2/4 1:00 – 3:00 pm (H) \$25 **NEW!**



(H) = Virginia Hospital Center
 (CS) = Carlin Springs Health Pavilion at 601 S. Carlin Springs Road, Arlington, VA 22204

SENIOR HEALTH PROGRAMS

For more information, call 703.558.6859.

Healthy Eating on a Budget

Learn how to be a savvy shopper & cook healthy meals on a budget.
 Wed 1/25 7:00 – 8:15 pm (H) \$15 **NEW!**

“Quit for Good” Smoking Cessation

Conquer the 3 aspects of smoking: addiction, habit & psychological dependency. *5 sessions.
 Mon & Wed 7:00 – 8:00 pm begins 2/6 (H) \$50

Massage for Couples

Learn the benefits & techniques of massage in this hands-on workshop.
 Sat 2/18 1:00 – 3:30 pm (CS) \$45/couple

HealthWorks

Bring customized health promotion programs, health fairs & wellness classes on-site to your business.

One on One Assessments

Contact Health Promotion to make an appointment: 703.558.6740.

Body Fat Analysis

Using high-tech equipment, we assess your percentage of fat, muscle & water. \$15

Dermascan

Non-invasive black-light scanning device which examines head & neck for potential or existing sun damage. \$10

Bone Density Screening

Osteoporosis risk assessment screening using p-dexa scan of the forearm. \$35

Resting Metabolic Rate Screening

Determine the number of calories you burn at rest, using the MedGem® indirect calorimeter. This is an important measure in assessing nutritional needs & helping you achieve weight management goals. \$55

Fingerstick Cholesterol Screening

Total Cholesterol & HDL. \$19
 Total Cholesterol, HDL, LDL & Lipids. \$23
 Total Cholesterol, HDL, LDL, Lipids & Glucose. \$25

Hypothyroidism Screening

Fingerstick blood test. \$25

A1C Diabetes Screening

Fingerstick blood test. \$25

Strength and Stretch for Seniors

Improve range of motion, muscle strength & bone health.
 Mon 1:00 – 1:45 pm begins 1/23 & 3/19 (H)
 Thurs 1:00 – 1:45 pm begins 1/26 & 3/22 (CS)
 \$42

Alzheimer’s Caregiver Support Group

3rd Wed of every month 10:30 – 11:30 am (CS)

Seniorcise

Maintain & regain strength & flexibility. 10-week sessions begin 1/16.
 Mon/Wed/Fri, 9:00 – 10:00 am. Carlin Springs Health Pavilion. \$70
 Mon/Wed/Fri, 9:15 – 10:15 am. McLean Baptist Church. \$70
 Mon/Wed, 10:30 – 11:30 am. Calvary Methodist Church, Crystal City. \$47

Lifeline Emergency Response

A 24-hour medical alert system personally overseen by Hospital staff.

Memory Screening Day

To schedule an appointment, call 703.237.9048.
 Fri 4/20 1:00 – 3:00 pm (CS)

Mall-Walking Program

A free fitness program featuring walking, stretching & blood pressure checks.
 Tues & Thurs 8:30 – 9:30 am Ballston Common Mall

Healthy Aging Lecture Series*

Fridays, 11:00 am – 12:00 pm (CS)

- 1/27 **STRENGTH TRAINING BENEFITS**
Cathy Turner, MS
Virginia Hospital Center
- 2/10 **ADULT PROTECTIVE SERVICES**
Karen Hannigan & Tom Buckley
- 3/23 **BRINGING ORDER OUT OF CHAOS**
RePurposelt, LLC
- 4/27 **ADVANCE DIRECTIVES**
Carolyn McCosh, RN
Virginia Hospital Center

*Registration required.

Health Promotion & Senior Health Registration Form

Complete this form and mail to Health Promotion Department, Virginia Hospital Center, 1701 N. George Mason Drive, Arlington, VA 22205-3698; or fax to 703.558.2456. Checks should be made payable to Virginia Hospital Center. You will receive a confirmation with directions. Parking tokens provided. For more details, call 703.558.6740.

Program Name

Program Date

Amount Enclosed

Name

Daytime Phone

Email Address

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Credit Card #

Visa Mastercard
 Amex Discover

Exp. Date

Signature

James B. Cole
President & CEO
Anthony M. Casolaro, MD
President, Medical Staff

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703.558.6595
www.virginiahospitalcenter.com

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Each person's health status is unique. The information offered in *HealthReach* is general in nature. Your personal healthcare provider is your best source of medical advice.

THE DOCTOR IS IN 24/7

AT THE ARLINGTON URGENT CARE CENTER

Staffed 24 hours-a-day with physicians, Arlington Urgent Care Center in the Carlin Springs Health Pavilion is your neighborhood solution for non-emergency medical care. When you just can't make it to your primary care physician—Arlington Urgent Care Center is here for you.

We treat:

- ◆ Cuts requiring stitches
- ◆ Colds or fevers
- ◆ Minor burns
- ◆ Sore throats
- ◆ Sprains
- ◆ Suspected fractures
- ◆ Physical exams for school or sports
- ◆ Minor worker's compensation injuries

X-ray services are available from 8:00 am to 7:00 pm weekdays and from 9:00 am to 4:00 pm weekends and holidays.

Arlington Urgent Care Center accepts most insurance plans, including Medicare, and worker's compensation. Don't forget to bring your insurance card, your photo ID and co-pay with you.

Arlington Urgent Care Center
Carlin Springs Health Pavilion
601 S. Carlin Springs Road
Arlington, VA 22204
703.717.7000

For more information about the Arlington Urgent Care Center, visit www.virginiahospitalcenter.com.

