Taking heart care to new heights

The new Cardiac and Vascular Clinic at Methodist Dallas covers all your heart care needs

Here’s the scoop!
Tips to help you pick the ideal ice cream

Tanning truths
Is there a healthy way to achieve that bronzed look?

The calm after the storm
In the wake of Hurricane Maria, Maria Casas was able to escape to Dallas for a lifesaving transplant
Contents

Inside & Online

TO YOUR HEALTH

30 Heart care made easier
Imagine going to just one place for heart screenings, follow-up visits, diagnostic procedures, and more. That’s what you’ll find at Methodist Dallas’ new Cardiac and Vascular Clinic.

38 A game changer for guys
If you struggle with the annoying, uncomfortable symptoms of benign prostatic hyperplasia, a new outpatient procedure might be right for you.

46 Here’s the scoop!
Can’t wait to cool down with ice cream? Check out these tips for picking the healthiest dip.

PATIENT STORIES

16 From horror to healing
In February 2017, a home intruder shot Miraf Assafu twice at close range. Fortunately, Methodist Dallas had the Level I trauma expertise and critical care services needed to save his life.

24 The calm after the storm
When Hurricane Maria took aim for Puerto Rico in 2017, Miguel Talavera, MD, and Maria Casas headed for Dallas, where lifesaving transplants awaited them.

Overcoming liver cancer
The Rev. Roberto Gomez credits God and Y-90 technology at Methodist Dallas for healing his liver cancer.

p. 8

p. 8

Does your makeup need a summer makeover?

Does your makeup need a summer makeover?

p. 8

p. 8
Finding the information you need about Methodist Health System is easier than ever at the new MethodistHealthSystem.org. Our new website is mobile friendly and makes it easy to find a physician, so you can access the care you need when you need it. Visit us online today!

Introducing the new and improved MethodistHealthSystem.org

Methodist Health System Foundation recently published its 2017 Crossroads annual report, themed “When Visions Align.” The book shares the stories of donors, physicians, nurses, and patients and how aligned visions bring about innovation, excellence, and healing. Crossroads also offers more insight into plans for the new Robert S. Folsom Wellness Center at Methodist Dallas Medical Center. Check it out here: MethodistHealthSystem.org/Crossroads.

When visions align, inspiration sparks

Meet these men with a message

You never miss an oil change for your car, and your cat still sees you as its trusted source for dinner. But how far does your “owner” expertise go when it comes to caring for yourself? Our Human Owners Manual checklist is handy for making sure you’ve got the right healthcare team and are caught up on screenings and vaccines. Check it out in our Shine Online blog at MethodistHealthSystem.org/Blog.

Don’t worry — we’re not starting a dating site. But there are some men who’ve caught our eye when it comes to health and wellness. In honor of Men’s Health Month in June, we’re letting them take center stage in a new video series, where they share the obstacles they’ve overcome and their best practices for fitness and nutrition. Watch for a new video each week in June at MethodistHealthSystem.org/Media.
To make sure your summer fun in the sun is also safe, take precautions against becoming dehydrated in the Texas heat.

That involves, for example, fueling up with water and sports drinks the day before outdoor activities to make sure your body has the fluids and electrolytes it needs to stay hydrated.

“You don’t want to wait until you have symptoms to start drinking fluids; you want to pretreat,” says Ketan Trivedi, MD, FACEP, medical director of the emergency department at Methodist Mansfield Medical Center.

Dr. Trivedi sees a number of patients in the emergency department each summer with heat exhaustion or heatstroke caused by dehydration. He offers these additional tips for lessening the likelihood that you’ll suffer heat-related illness:

- Limit activity to shorter durations.
- Alternate activity with resting in the shade to give your body a chance to cool down.
- Drink more than the recommended eight to 10 glasses of water a day if you’re going to be exerting yourself.
- Alternate water with sports drinks or coconut water, which contain the necessary electrolytes, sodium, and potassium.
- Eat potassium-rich foods, such as melon, beans, and spinach.
- Avoid alcohol, soda, and caffeine, which can contribute to dehydration.

Am I in danger?

Being dehydrated along with exposure to the sun and hot temperatures can lead to heat-related illnesses, which can be life-threatening. Dr. Trivedi says to look out for these symptoms of heat exhaustion: muscle cramps, fatigue, profuse sweating, light-headedness, and dizziness. (Also see “Signs of Heatstroke” on the next page.)

“If those symptoms occur, immediately stop the activity, go into a shaded area, and remove or loosen clothing,” he says. “The best treatment is to turn on a fan and have cool water misted on you.”

There are often underlying factors that put some people at a higher risk for heat illnesses than others. Those factors include genetics, physical fitness, or underlying illnesses like heart disease.

“These underlying risk factors don’t typically change, so if you were susceptible before, you’ll still be at risk,” Dr. Trivedi says. “If you’ve already had a heat-related illness once, you want to be a little more careful in the future.”

» HYDRATION YOU CAN EAT

There are certain foods that can help you stay hydrated, too. Read all about them in our blog post, “Hydration — More Than Just Water,” at MethodistHealthSystem.org/Blog.
Signs of heatstroke

Missing the signs of heat exhaustion can lead to heatstroke, a much more serious condition that requires immediate medical evaluation.

“Heatstroke is a true medical emergency, and the patient needs to be brought to the emergency department promptly,” says Ketan Trivedi, MD, FACEP, medical director of the emergency department at Methodist Mansfield Medical Center.

Signs of heatstroke include:
• Altered mental status
• A lack of sweating
• Appearing ill
• Feeling nauseated
• Not recovering after being in the shade.

“People often confuse heat exhaustion and heatstroke, but there’s a huge difference,” Dr. Trivedi says. “Altered mental status and an absence of sweating are the hallmark differences that accompany heatstroke. The problem with heatstroke is that it can start affecting different organs in the body — liver, kidneys, and muscles — so people have to be evaluated appropriately.”

YOU MAY HAVE HEARD THAT DRINKING PICKLE JUICE CAN STAVE OFF DEHYDRATION, BUT THE OPPOSITE IS TRUE. DR. TRIVEDI CAUTIONS AGAINST CONSUMING FOODS WITH EXTREMELY HIGH SODIUM CONTENT — THEY CAN ACTUALLY BE DEHYDRATING.
Sun-kissed or sun-cursed? Why you should rethink how you tan

By now you probably know that achieving the perfect bronzed look isn’t worth the exposure to dangerous UV rays. After all, they can accelerate aging of the skin, including sunspots and wrinkles, as well as lead to life-threatening skin cancers.

So what about nontraditional tanning methods — sprays, lotions, tanning pills, and one of the latest trends, overloading on certain fruits and veggies?

Can carrots help me tan? One tanning fad is to eat an abundance of orange or yellow produce, which contains an ingredient called beta carotene. If you eat a lot of these foods, particularly carrots, your skin tone may change a bit — but it may not have the finish you want.

“Consuming a diet very high in these specific fruits and vegetables may provide a somewhat ‘tan’ appearance, but more often than not, it leads to more of an orange or yellow appearance that is not consistent with a glowing tan,” says Angie Koriakos, DO, dermatologist on the medical staff at Methodist Richardson Medical Center.

On top of that, it throws off a balanced diet. Dr. Koriakos suggests skipping this tanning method and eating these fruits and vegetables in moderation.

Tanning with a tablet One alternative treatment to tanning beds and laying out in the sun is tanning pills. They became a new trend after people started to worry about getting too much direct contact with UV rays. Dr. Koriakos makes a strong case against using them, however.

“The most common tanning pills contain a product called canthaxanthin that is approved by the U.S. Food and Drug Administration (FDA) for use as a color additive in foods,” she says. “It is not, however, approved for the use of tanning.”

She doesn’t suggest using these pills because of their dangerous side effects:
• Crystal deposits in the eyes, leading to decreased visual acuity
• Gastrointestinal disturbances

The only truly ‘safe’ tan is no tan. And don’t forget SPF-protected clothing and sunscreen to shield the skin from harmful UV radiation.

— Angi Koriakos, DO

» A LETTER TO MY 16-YEAR-OLD SELF

A Methodist Health System employee shares her journey with skin cancer and encourages others to be aware of the risks associated with tanning. Take a look at a letter she wrote to her 16-year-old self in our blog at MethodistHealthSystem.org/Blog.
Sun-cursed?

• Aplastic anemia (your body stops producing new blood cells, putting you at risk for infection and uncontrollable bleeding). “That’s just the beginning,” Dr. Koriakos says. “There are other potentially harmful ingredients in the pills so it’s safer to not use them at all.

They may not contribute to skin damage, but they will have adverse effects on other parts of your body.”

**A safer summer glow**
The only thing that can somewhat pass as a safe option to get a glow, in Dr. Koriakos’ opinion, is tanning sprays and lotions, such as you find in custom airbrushing.

“Airbrush tanning, as well as lotion and spray products, contains dihydroxyacetone, which is an FDA-approved color additive that temporarily stains the skin and provides a tan appearance,” she says.

Nevertheless, Dr. Koriakos says there’s one fail-safe way to protect your skin: Stop tanning.

“The only truly ‘safe’ tan is no tan,” she says. “And don’t forget SPF-protected clothing and sunscreen to shield the skin from harmful UV radiation.”

---

**Sunscreen smarts! Did YOU know?**

![Sun](image)

**1 oz.**

You should use about an ounce to cover your body — enough to fill a shot glass. That’s about 2 tablespoons.

**REAPPLY EVERY:**

2 hours and immediately after swimming or sweating

“Broad spectrum” means it filters out both UVA and UVB rays. Both contribute to skin cancer.

The American Academy of Dermatology recommends using SPF 30, which blocks 97 percent of UVB rays.
Does your makeup need a summer makeover?

If you’re going out for a fun day in the sun, there’s a good chance you’ll put on a nice sundress and a pair of sandals and finish off your look with a fresh coat of makeup. Cosmetics can make you feel and look good, but they can also cause skin problems if you’re not careful.

**Be a minimalist**

Tang Le, DO, dermatologist on the medical staff at Methodist Charlton Medical Center, encourages you to wear a small amount of makeup in the summer. With all that Texas heat, many of us will start sweating as soon as we step outside. Dr. Le says the added moisture on your face combined with heavy amounts of makeup can clog your pores or lead to an allergic reaction.

You don’t have to stop your beauty routine altogether, though. “I recommend doing whatever makes you feel good, but keep it minimal and reasonable so your skin doesn’t suffer,” Dr. Le says.

While you’re cutting back on the amount of cosmetics you’re using, make sure you’re using a brand that’s good for your skin. Dr. Le suggests looking for products with a label that says “noncomedogenic,” which means the product contains ingredients that help keep pores from becoming clogged.

**Put on extra protection**

Everyone should make an effort to protect their skin in the summer, and odds are your makeup alone won’t cut it. “Most makeup foundation today does contain some sunscreen, but the SPF is usually too low for good skin protection,” Dr. Le says. “Start with a layer of sunscreen with an SPF of 30. If you already wear a brand of makeup with SPF 30, you’ll have almost 100 percent sun protection.”

Dr. Le adds that it’s important to reapply your sunscreen multiple times a day to make sure it’s fresh and still doing its job.

Wearing a hat can also help block out the sun and protect your face during the summer. If you’re at the beach, make sure to stay under an umbrella. Dr. Le especially urges staying out of the sun between 10 a.m. and 2 p.m.

**Have fun**

While no skin-protection technique is perfect, a combination of several can keep your skin looking healthy without forcing you to sacrifice your makeup routine — or summer appearance.

“Summer is supposed to be fun,” Dr. Le says. “I’d just suggest that everyone be aware of the sun.”

You can find a dermatologist to help keep your skin looking fresh all year long at [MethodistHealthSystem.org/FindADoctor](http://MethodistHealthSystem.org/FindADoctor) or by calling 214-444-7303.
The plentiful variety of Texas-grown fruits makes it easier to eat healthier throughout the summer, and buying in season is easier on your budget, too. But the benefits to indulging in locally grown, seasonal fruit don’t stop there. Here are some other advantages:

1. The flavor and texture of seasonal fruit are better than frozen, canned, or out-of-season fruits.
2. Fresh, juicy fruits are a natural way to hydrate your body during hot summer months.
3. Fruits traveling the shortest distance from farm to table have the highest nutritional value because their beneficial antioxidants and phytochemicals break down over time, even during shipping.

**LOOK WHAT TEXAS FARMERS ARE HARVESTING THIS SUMMER**
Below is just a sample of the state’s fruit finds. For help finding them fresh locally, visit our blog “Go Farm Fresh This Summer” at [MethodistHealthSystem.org/Blog](http://MethodistHealthSystem.org/Blog).

<table>
<thead>
<tr>
<th>Fruit</th>
<th>Description</th>
<th>Calories</th>
<th>Benefits</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>APPLES</strong></td>
<td>Nature’s perfect grab-and-go snack.</td>
<td>95 per medium-size</td>
<td>A good source of: fiber, vitamin C, vitamin K, and vitamin B6</td>
</tr>
<tr>
<td><strong>CANTALOUPES</strong></td>
<td>Delicious by the slice, in fruit salad, even grilled!</td>
<td>53 per cup</td>
<td>A good source of: vitamin A and vitamin C</td>
</tr>
<tr>
<td><strong>BLUEBERRIES</strong></td>
<td>Add them to everything.</td>
<td>84 per cup</td>
<td>A good source of: antioxidants, vitamin K, vitamin C, and manganese</td>
</tr>
<tr>
<td><strong>CUCUMBERS</strong></td>
<td>Technically a fruit with almost no sugar. How refreshing!</td>
<td>7.8 per ½ cup</td>
<td>A good source of: vitamin K</td>
</tr>
<tr>
<td><strong>SWEET CORN</strong></td>
<td>Surprise, it’s technically a fruit!</td>
<td>88 per ear</td>
<td>A good source of: vitamin C, thiamin, niacin, leucine, and phosphorus-P</td>
</tr>
<tr>
<td><strong>BLACKBERRIES</strong></td>
<td>Eat them by the handful.</td>
<td>62 per cup</td>
<td>A good source of: antioxidants, fiber, vitamin C, vitamin K, manganese, and copper</td>
</tr>
<tr>
<td><strong>PEACHES</strong></td>
<td>Get creative with salsa or a chilled summer soup.</td>
<td>59 per medium-size</td>
<td>A good source of: vitamin C, vitamin A, and vitamin K</td>
</tr>
<tr>
<td><strong>TOMATOES</strong></td>
<td>Another versatile fruit everyone thinks is a vegetable!</td>
<td>22 per medium-size</td>
<td>A good source of: vitamin C, vitamin A, vitamin K, and manganese</td>
</tr>
</tbody>
</table>
Virtual visits with MethodistNOW are making medical care easier than ever

We've all been there — waking up with a completely stopped-up nose and thinking, “There is no way I can miss work to go to the doctor.” Or maybe it’s your oldest child who is sick, and the thoughts run more like, “I do not want to load up this kiddo, his two younger siblings, plus their toys and snacks in the car for a trip to the pediatrician.”

Thankfully, you can turn to MethodistNOW, the new virtual health service that gives you access to a doctor in just a few clicks.

“With MethodistNOW, patients receive high-quality care from a Methodist Medical Group primary care provider (PCP) no matter where they are accessing the service — at home, in the office, even on vacation,” says Akanksha Kumar, MD, family medicine physician with Methodist Family Health Center – Preston Hollow. “This technology makes people’s lives so much easier.”

Convenient and cost-conscious
MethodistNOW doctors are available seven days a week, and the average doctor response time is under 15 minutes. The service comes at a flat rate of $40. Physicians can help diagnose more than 25 minor conditions, including colds, the flu, pinkeye, bladder infections, and lice, and then give a recommended treatment plan.

During the particularly bad flu season this past winter, MethodistNOW was incredibly helpful to people wondering if they might have the flu. Not only were they able to stay comfortable at home and save time, but they also avoided spreading germs to others. These patients received a prescription quickly and could then focus on getting better.

Get a diagnosis and direction
When you start a virtual visit, you’ll answer a series of questions about how you are feeling and the symptoms you are experiencing. You can upload photos if needed — great for situations like wounds, rashes, and bites.

Another benefit is that your treatment plan will be entered into your electronic medical record so your PCP has access to all the information.

Of course, the system will not cover every circumstance. “When there are red-flag signs and symptoms, I’ll say in the patient’s treatment plan that he or she is better off being referred to an office,” Dr. Kumar says. “The goal is to be a resource to patients and give them the information they need to get the right care.”

» ISN’T TECHNOLOGY GREAT?

Head to MethodistNOW.Life to learn more or start a visit.
Our grand opening is right around the corner!

Methodist Convenient Care Campus

4560 Lake Ridge Parkway
Grand Prairie, TX 75052

The new, modern, 31,000-square-foot Methodist Convenient Care Campus brings together urgent care, family health, and specialist physician offices for everything from cardiology to sports medicine. Convenient indeed. Trust. Methodist.

Methodist Urgent Care
Opens May 28

Methodist Family Health Center
Opens May 29

Chamber of Commerce Ribbon-cutting Ceremony
Thursday, June 7
9:30 a.m.
Featuring Mayor Ron Jensen,
City of Grand Prairie
Breakfast and tours
See yourself, not your scars

HIDDEN SCAR™ TECHNIQUE OFFERS COSMETIC AND OTHER BENEFITS FOR BREAST CANCER SURGERY PATIENTS

For years, breast cancer patients facing surgery had little choice but to live with prominent post-surgery scarring — often a reminder of a frightening and anxiety-ridden experience.

Today, thanks to an oncplastic (oncology and plastic surgery) technique known as Hidden Scar™, patients have a breast surgery option that can result in smaller scars often located in less visible areas of the body.

“Besides treating the cancer, our goal is to reduce or hide scars so that patients see themselves — not their cancer — whenever they look in the mirror,” says Allison DiPasquale, MD, breast surgeon on the medical staff at Methodist Charlton and Methodist Mansfield Medical Centers and breast program director at Methodist Charlton.

“The ability to see your old self — or even a ‘better’ self, in cases where breast reconstruction includes lifts or implants — is an important part of the process of getting back to a cancer-free life.”

Better breast surgery outcomes

While traditional breast surgery procedures call for incisions right where the tumor is, Hidden Scar incisions are made in less visible areas, such as the areola (darker nipple area), the underside of the breast, or the underarm.

The surgery is performed with an Invuity® retractor, a lighted, lightweight, adjustable tool that affords surgeons enhanced visibility and agility.

“These retractors have been revolutionary for breast surgeons,” explains Jenevieve Hughes, MD, FACS, breast surgeon on the medical staff at Methodist Richardson Medical Center. “They allow us to make a small incision in a hidden place, then safely tunnel over a great distance to remove the tumor. In some cases, they even allow us to spare the patient’s nipple during a mastectomy.”

Although some patients with advanced cancer or other special circumstances aren’t eligible for Hidden Scar surgery, dozens of these procedures are performed at Methodist hospitals each year — and that number is expected to grow.

“Besides the cosmetic benefits, Hidden Scar procedures offer less painful incision sites and reduced chances for tissue damage and other complications,” Dr. DiPasquale says. “All women facing breast surgery should discuss and advocate for this option with their surgeon.”

» FOR YOUR BREAST CANCER JOURNEY

If you’re looking for a skilled surgeon to help you face breast cancer, visit MethodistHealthSystem.org/FindADoctor.
Events

Check out some of the happenings at Methodist Health System this season.

**HOME RUN FOR HEALTH**
Saturday, June 2, 9 a.m. to 2 p.m.
Kidd Springs Recreation Center, 711 W. Canty St., Dallas, TX 75208
Methodist Digestive Institute (MDI) is loading up the bases with amazing resources to educate the community about digestive health:
- Health screenings, including blood pressure and blood glucose checks
- An Ask-the-Doctor booth
- Short talks by MDI physicians on health-screening topics
- Baseball-themed activities for the kids
- Chair massages
- Fitness demonstrations (Zumba®, yoga, Camp Gladiator, karate)
- Tours through our giant inflatable colon
- Free refreshments.
- Tours through our giant inflatable colon
- Free refreshments.
  
  » No RSVP needed, but call 214-933-6601 or by calling Katie Mosteller at 682-242-7132.

**DIABETES EDUCATION**
- Methodist Dallas Medical Center
  Golden Cross Academic Clinic
  122 W. Colorado Blvd., Dallas, TX 75208
  Last Wednesday of the month, June 27, July 25, Aug. 29, 10 a.m. to 2 p.m.
  » Registration is required. Go to MethodistHealthSystem.org/Events to learn more and to sign up.
- Methodist Mansfield Medical Center
  2700 E. Broad St., Mansfield, TX 76063
  - First Saturday of the month, June 2, July 7, Aug. 4, 9 to 10 a.m., J. Randall Canedy Room
  - Fourth Tuesday of the month, June 26, July 24, Aug. 28, 6 to 7 p.m., Classroom C
  » RSVP at MethodistHealthSystem.org/Events or by calling Katie Mosteller at 682-242-7132.
- Methodist Richardson Medical Center
  2831 E. President George Bush Highway, Richardson, TX 75082
  First Tuesday of the month (except January and July), June 5, Aug. 7, 6:30 p.m., Physician Pavilion, Suite 200
  Did you know that type 2 diabetes puts you at greater risk for a heart attack or stroke? Come learn more about the cardiovascular risks. Don’t let type 2 diabetes come between you and your heart.
  » For more information, email heatherbeard@mhd.com.

**HPB CANCER SUPPORT GROUP**
Second Tuesday of the month, June 12, July 10, Aug. 14, 5:30 to 6:30 p.m.
Conference Room, Methodist Richardson Cancer Center, 2805 E. President George Bush Highway, Richardson, TX 75082
This support group is open to all patients with liver, pancreas, and bile duct cancers and their caregivers.
No one fights alone, so come to support each other and learn valuable information from survivors and guest speakers.
» For more information, email alyssachapates@mhd.com.

**3rd DAY OF SUMMER**
Saturday, June 23, 10 a.m. to 12:30 p.m.
Auditorium, Methodist Richardson Medical Center, 3500 W. Wheatland Road, Dallas, TX 75237
Join us at this free event for tips on taking great care of you and your family during the summer months.
The program will feature:
- How to prepare quick and healthy meals during the summertime
- Fun family fitness demonstrations
- A discussion with the Holden family, founders of the Holden Strong Foundation (read more on page 14)
- Heart screenings for people ages 11 to 25, provided by the Holden Strong Foundation and Who We Play For (whowoplayfor.org)
  » Information tables about programs and services at Methodist Charlton
- Free massages.
  
  » Register at ThirdDayOfSummer.org or by calling 972-992-7621.

**BASTILLE ON BISHOP**
Saturday, July 14
Bishop Arts District, Dallas
Oak Cliff is home to the largest French celebration in Texas! Bastille on Bishop, presented by Go Oak Cliff and sponsored by Methodist Dallas Medical Center, will take over the Bishop Arts District on the actual French Independence Day, July 14.
» Buy your tickets at bastilleonbishop.com/tickets.

**HIS AND HERS**
Saturday, July 28, 10 a.m. to 12:30 p.m.
Auditorium, Methodist Charlton Medical Center, 3500 W. Wheatland Road, Dallas, TX 75237
This fun-filled event welcomes couples of any age to learn from our experts about the different health needs of you and your spouse.
Together, you’ll learn how to make healthy food choices, exercise properly, and cultivate good sleep habits.
A physician panel discussion will share simple ways to protect your skin and what you need to know for your next medical checkup.
Plus, there will be fun games and prizes!
» Register today at HisAndHer.org or by calling 972-992-7621.

**WOMEN IN MINISTRY BRUNCH**
Saturday, Aug. 18, 10:30 a.m. to 12:30 p.m.
Auditorium, Methodist Richardson Medical Center, 3500 W. Wheatland Road, Dallas, TX 75237
Methodist Charlton is pleased to welcome women in ministry from across Dallas for this free event expressing sincere appreciation for the work they do.
It’s a wonderful opportunity for women in ministry to connect with one another and Methodist Charlton to find ways to collaborate and partner for a better community.
Joining us on our panel will be Dallas County District Attorney Faith Johnson and Sheriff Marian Brown.
» To reserve your spot, call 972-992-7621 or email RSVP@mhd.com.
Jarron Holden II is back on the basketball court after surviving sudden cardiac arrest.
Aug. 31, 2016, was the scariest day of Jarron Holden II’s life, yet it’s a day that he barely remembers.

His middle school was holding its eighth-grade basketball team tryouts, and Jarron was in the middle of a scrimmage. “That’s the last thing I remember,” he says.

His mom and dad, Dana and Jarron Holden, remember the details, though. “He tried to walk off the court, but he collapsed,” Dana says. “We thought he was just being silly — until he didn’t get up.”

Jarron had gone into sudden cardiac arrest from an undiagnosed congenital heart condition.

Fortunately, an AED (automated external defibrillator) machine was nearby, and one of the parents present was a medical health professional who immediately administered aid and CPR.

When emergency personnel arrived minutes later, they couldn’t get Jarron’s heart started again, but they manually ventilated his lungs and continued CPR to keep his body supplied with oxygen while on route to nearby Methodist Charlton Medical Center.

Jarron had been in full cardiac arrest for nearly 30 minutes by the time he reached the emergency department.

“Blood was just pouring out of his lungs and out of his bladder via the catheter we put in,” Dr. Philip says. “We were really confused about what the underlying problem was. He was a kid who was otherwise healthy.”

The bleeding further complicated Jarron’s delicate situation. Lungs can’t absorb oxygen when they’re full of fluid, so other organs — like the brain — also become deprived of necessary oxygen.

“We were concerned with how to get his oxygen levels up until he could get to a pediatric intensive care unit,” Dr. Philip says. A person’s oxygen level should be 92 percent or higher on a ventilator to avoid irreparable brain damage. Jarron’s was about 68 percent.

Dr. Philip administered a blood-clotting medication to stop the bleeding in Jarron’s lungs and adjusted the ventilator to force oxygen into his bloodstream and keep his brain alive until the CareFlite air ambulance could transport him to Children’s Medical Center.

“Even though there were so many unanswered questions about Jarron’s condition, Dr. Philip kept us informed as much as possible and even asked if he could pray with us,” Dana says. “Most people in Jarron’s situation don’t make it.”

Ready for more court time

After a harrowing hour at Methodist Charlton, Jarron was on life support at Children’s Medical Center for nearly a week, and it took that long for the hospital to get any definitive results. After an open heart surgery was scheduled to fix the congenital defect in Jarron’s heart, Dr. Philip visited him at Children’s.

“His case is definitely on the miracle level, considering he survived a long cardiac arrest and the complications afterward,” Dr. Philip says.

Shortly after Jarron’s recovery, the Holden family founded the Holden Strong Awareness Campaign to teach young people how to administer CPR and use an AED should they ever encounter an emergency situation like Jarron’s — one which he wouldn’t have survived had it not been for the immediate response of bystanders.

The ultimate goal of the foundation is to do EKG screenings to catch kids’ heart defects before they potentially become fatal.

Today, Jarron is a normal teenager who played basketball on his high school freshman A team last season and has no lasting effects from the ordeal.

“It hasn’t affected my athletic performance at all,” he says. “I’m just glad I had the right people there to care for me and hope my family and I can pay it forward to help other kids like me.”

» WATCH HIS STORY

Hear firsthand from Jarron and his mom about the care he received at Methodist Charlton at MethodistHealthSystem.org/Media.
It has been nearly a year and a half since a brutal home invasion almost took his life.

“I was told more than once that it was a miracle I survived,” says 27-year-old Miraf Assefa. “Sometimes I can’t believe that I did.”

On the morning of Feb. 28, 2017, Miraf was awoken by the sound of music coming from the living room of the Dallas home he shared with a friend. When he walked into the room, he came face to face with an intruder who immediately shot him in the abdomen with a 12-gauge shotgun. The intruder followed Miraf into his bedroom and fired a second shot, this time into the side of his hip.

“I’m on the floor, and I see my intestines and look up and beg the guy to not shoot me again,” Miraf recounts. “I decided to pretend to take my last breath in hopes he would just leave, which he eventually did. I had a few moments where I felt myself floating above my body, but then something in my head snapped and I knew it wasn’t my time to go.”

Unable to walk or crawl, lying on his back, Miraf used one hand to hold in his intestines and used his uninjured leg to push himself partially out the front door. Some passing pedestrians heard him yelling for help and called 911.

“When I heard the sirens, I knew I was going to be okay,” Miraf says. “I remember hearing the paramedic ask the driver, ‘Where are we taking him?’ and the driver immediately said, ‘Methodist.’”

Minutes count

The Level I trauma team at Methodist Dallas Medical Center was waiting in the trauma bay when Miraf arrived. J. Darryl Amos, MD, FACS, chief of trauma, was the lead surgeon that day.

“We immediately recognized the severity of Miraf’s injuries,” Dr. Amos says. “He had a devastating penetrating blast injury, like the type you might see on a military battlefield. After operating on him for nearly six hours, we were finally able to stabilize his condition. It was touch-and-go the entire time.”

Miraf would end up spending two months in the intensive care unit at Methodist Dallas, having countless surgeries before being discharged to a rehabilitation hospital for another 2½ months before finally going home.

Experience and expertise

“I often wonder why the paramedics chose Methodist over another hospital,” Miraf says. “They must have known it’s where I needed to be. I’m so grateful for all the surgeons, doctors, therapists, and nurses who cared for me at Methodist. I wouldn’t be here without them.”

Methodist Dallas became one of three adult Level I trauma centers in Dallas County in 2014. Level I is the highest attainable trauma center designation awarded by the American College of Surgeons. Hospitals with this designation are required to lead their communities in research and injury prevention. They also must have trauma surgeons in house 24 hours a day, along with prompt availability of surgeons in numerous surgical subspecialties.

“The trauma team at Methodist Dallas has set a high standard,” Dr. Amos says. “Our surgeons are board certified in both surgical critical care and general surgery. Plus, our team has more than 10 years’ experience working together, so when patients like Miraf come in with complex, life-threatening injuries, we know how to provide them with high-quality care.”

Dallas-Fort Worth relies on the trauma services at Methodist Dallas every day because when it comes to life-threatening injuries, finding the highest-level trauma center in the quickest amount of time can mean the difference between life and death.

» WHY TRAUMA LEVEL MATTERS

Read about different trauma levels and what they mean when it comes to emergency care in our Shine Online blog at MethodistHealthSystem.org/Blog.
While Methodist Dallas helped Miraf Assefa recover physically from traumatic gunshot wounds, his girlfriend, Monica Cortes, and puppy, Coco, have helped him emotionally.
When baby’s ready, so are we

WHEN JEANETTE ALEGRIA’S WATER BROKE EARLY, SHE KNEW EXACTLY WHERE TO GO

As Jeanette Alegria can tell you, babies are oblivious to calendars, clocks, and your plans for delivery. Around 3 a.m. on a cold day this past January, her water broke a week before her due date.

“I knew I would be in good hands if I went to Methodist Mansfield Medical Center,” says Jeanette, who lives in Alvarado with her husband, Tony; their 4-year-old son, Andy; and 1-year-old daughter, Dulce.

Though Jeanette was supposed to deliver at the hospital where she had her daughter, she couldn’t forget the wonderful experience she’d had delivering her son at Methodist Mansfield three years earlier.

So when baby No. 3 began her surprise arrival, Jeanette turned to the hospital she trusted most.

Excellent care for mother and baby
The OB/ED (obstetrics emergency department) at Methodist Mansfield offers 24/7 services for women in labor or experiencing other pregnancy-related emergencies.

“It’s a hospital within a hospital for pregnant women,” says Tiffany Remsing, MD, OB-GYN hospitalist on the medical staff at Methodist Mansfield. The OB/ED is located by the labor and delivery unit. Every woman who is 20 weeks pregnant or more is seen by an OB-GYN physician who does an initial exam in the OB/ED to confirm if she is in labor or has other medical issues. If admitted, she is transferred to a labor and delivery suite.

“Having OB hospitalists on staff around-the-clock is a great comfort for moms,” Dr. Remsing says. “Sometimes their assigned OB-GYNs are seeing other patients or are on their way to the hospital when it’s time to deliver. In the meantime, we’re board-certified specialists who can care for these patients and help to ensure a safe delivery. Even our nurses in the OB/ED are specialized labor and delivery nurses.

“In addition to this service, it’s also important that Methodist Mansfield has a Level III Neonatal Intensive Care Unit (NICU) in case the baby needs more support,” Dr. Remsing adds.

A second time around
Fortunately in Jeanette’s case, she had a normal delivery of another beautiful, healthy girl, though the first hours had been quite stressful for her.

She and Tony weren’t prepared for her water to break a week before her due date. Fortunately, they were able to stay in the hospital and have a normal delivery of another beautiful, healthy girl.

The Alegria family welcomed its newest member, Monserrat, in January.
break early. They had planned for her mother to fly from California the following week to be there when Jeanette went into labor. Now, Tony had to stay with the children, while Jeanette’s mother changed her flight and other family members made arrangements to help watch the children. Jeanette drove herself the nearly 20 miles to Methodist Mansfield.

She was admitted by the OB/ED OB-GYN hospitalist on shift and started on oxytocin to encourage her labor. Dr. Remsing came on shift at 9 a.m. and took over Jeanette’s care.

“When I met Jeanette, she already had her epidural and it was working well for her, so she was very happy,” Dr. Remsing says. “Within a few hours, she was fully dilated and ready to push.”

The experience she wanted
Jeanette had recalled how the nurses, physicians, and others had cared for her during her first pregnancy. Once again, they worked to give her an overall positive experience.

“I felt at home at this hospital,” Jeanette says. “Dr. Remsing was very sweet and reassuring, especially because I was a nervous wreck over leaving the kids and was worried my husband wouldn’t make it in time for the birth.”

Tony did make it, however, and was by his wife’s side to welcome their third child. In three pushes, little Monserrat arrived. For Jeanette, it was the experience she hoped for — safe, comfortable, and surrounded by those she loves.

“I was very fortunate to have a good hospital close to home,” she says.

» TAKE A LOOK

Methodist Mansfield Medical Center is a nationally recognized hospital with a family-centered approach to obstetrics care. Learn more and take our virtual tour at MethodistHealthSystem.org/Mansfield-Womens-Tour.
PATIENT STORY

GOING TOE-TO-TOE WITH HIP PAIN

HOW TOTAL JOINT REPLACEMENT GOT DAVID WELLS BACK ON HIS FEET

David Wells looks forward to putting up his dukes again after a successful hip replacement surgery.

David Wells looks forward to putting up his dukes again after a successful hip replacement surgery.
When he isn’t at the courthouse, traveling for business, or enjoying time with his family, you may find David Wells at the boxing gym. He might be working out or advising aspiring champions, but it’s a hobby that helps him stay in touch with his community and on his toes for his occupation. David is an investigative consultant who helps people, mostly athletes, facing civil or criminal justice issues.

About two years ago, though, hip pain completely knocked David out of his routine. Now, after total hip replacement and physical rehabilitation at Methodist Charlton Medical Center in August 2017, he is thankful to be back on his feet — and back in the ring.

David had been receiving treatment before coming to Methodist Charlton, but it wasn’t effective. “My pain was so severe I had to leave a summer football training camp,” he says. “I was bent over, and I couldn’t walk, sleep, tie my shoes, or do anything. I tried cortisone steroid shots. They just didn’t work for me.”

So David did what he does best: He investigated, researching Dallas-area hip replacement programs until he found his best match.

Finding a champion
David and his wife arranged a consultation with Clinton Bell, MD, orthopedic surgeon on the medical staff at Methodist Charlton. Before they left, David says he knew he was in the right place.

“Mr. Wells had severe arthritis in his hip and was experiencing significant stiffness and loss of motion,” Dr. Bell explains.

Due to the advanced deterioration in David’s hip, total hip joint replacement was needed, and he was in good hands as Methodist Charlton is certified by The Joint Commission in hip joint replacement procedures.

Within weeks of consultation, Dr. Bell performed the surgery using a minimally invasive posterior approach. With this approach, the surgeon accesses the hip joint through a 4- to 6-inch incision along the outer hip area, which allows the surgeon direct, full visualization of the hip cup and femur.

“These days with hip replacement surgery, the incision is relatively small, and we do a lot to preserve tissue and minimize cutting soft tissues and muscle,” Dr. Bell says. “Patients are up, bearing weight, and walking within a day of their surgery.”

One of the best hospitals
Dr. Bell says patients should expect about a year’s worth of improvements. “Generally, they use a walker, then a cane during the first month after their surgery and work with a therapist to rebuild strength and range of motion,” he says. “By six weeks, they are typically doing quite well and getting back to their daily activities.”

David was no exception.

“I’m back doing what I normally do,” David says. “I can walk, tie my shoes, play with my kids.

“I had a great experience with Methodist Charlton. I want people to know I think it’s one of the best hospitals around, and it’s amazing that some of the best doctors are here in the DeSoto, Duncanville, and Cedar Hill area. On my chart, Dr. Bell is one of the best surgeons around.”

“Mr. Wells had severe arthritis in his hip and was experiencing significant stiffness and loss of motion,” Dr. Bell explains.

“Mr. Wells had severe arthritis in his hip and was experiencing significant stiffness and loss of motion,” Dr. Bell explains.

“I had a great experience with Methodist Charlton. I want people to know I think it’s one of the best hospitals around, and it’s amazing that some of the best doctors are here in the DeSoto, Duncanville, and Cedar Hill area. On my chart, Dr. Bell is one of the best surgeons around.”

No longer in pain, David Wells can help train aspiring athletes at the boxing gym.
Saying "I do" in a hospital chapel isn’t quite how 67-year-old Debbie Youngblood imagined marrying her high school sweetheart, Tom — but she wouldn’t change a thing now that she has walked down the aisle at Methodist Richardson Medical Center.

“When chaplain Gerry Nichols came to me and told me their story and wish to get married right away, I knew we had to do this for them,” says Jan Arrant, director of community and public relations.

Tom and Debbie’s story begins when they were both in the Waxahachie High School marching band. Friends first before they began dating, both thought they would end up together, but life had other plans as they each married someone else and started their own families. Fortunately, the two couples stayed in touch over the decades, and Tom and Debbie remained friends after Debbie’s first marriage ended and Tom lost his wife to Alzheimer’s disease.

In May 2017, when Debbie was diagnosed with a blockage in her intestines, she turned to Tom for support. “While I was in the hospital, I texted Tom and asked him to pray for me,” Debbie says. “From that moment on, we just kept texting.”

When Debbie got out of the hospital, Tom asked her to dinner. After three hours of catching up on life, Tom declared his intention to marry her.

A turn for the worse
As Tom and Debbie started to make plans for a wedding at their home in Ennis, Debbie developed another, more serious blockage. Unable to keep food down, she lost nearly 40 pounds in eight weeks, causing severe malnourishment.

“When Debbie was transferred to Methodist Richardson, she was in very poor health,” explains D. Rohan Jeyarajah, MD, FACS, director of gastrointestinal surgical services at the hospital. “The rectal cancer and possible ovarian cancer were creating a mess in her pelvic area, so surgery was a must, but she was so frail I wanted the least-invasive surgical option possible for her. Fortunately, both her surgery and recovery far exceeded expectations.”

Planning a wedding
Before the surgery was underway, Tom set in motion some plans of his own. He realized he wanted Debbie to be his wife as soon as possible, so he suggested they get married in the hospital chapel.

With the help of the hospital team, they set a date and plans immediately began to take shape. The hospital’s chef was asked to make a cake, and a trusted florist created all the floral arrangements with Debbie’s favorites, daisies and roses.

Debbie hoped to continue her family’s tradition of walking down the aisle to “Canon in D,” so when a hospital volunteer who is a pianist agreed to do the honors, she was thrilled.

As the chapel arrangements came together, some fourth-floor surgical nurses — Kristin Arthur, RN; Alyssa Jones, RN; Kate Hoang, RN; Vu Hoang, RN — and unit secretary Jennifer Michael took care of getting the bride ready for the ceremony.

“On the morning of the wedding, my nurses, who were going to act as my honorary bridesmaids, were just giddy,” Debbie says. “They made me feel so special with the gifts and flowers they brought me.”

‘The wedding of our dreams’
Just three days after major surgery, Debbie fulfilled her dream of becoming Mrs. Youngblood.

Nichols performed the ceremony, which included a touching poem written and read by chaplain Donny Marandure. Nearly every team involved in Debbie’s care was represented at the service, making it all the more special for her.

“There wasn’t a single thing overlooked on that day, from making sure I had a chair to sit in while we exchanged our vows to the ‘just married’ decorations all over my room when we got back upstairs,” Debbie says. “Tom and I will never forget all that was done for us. It was truly the wedding of our dreams that day.”

Love was in the air as Methodist Richardson chaplains Gerry Nichols (left) and Donny Marandure (right) helped the Youngbloods celebrate the wedding of their dreams.
Helping a couple get hitched at the hospital

Tom and Debbie Youngblood are excited to start their life together.

» IN THEIR WORDS
Go to MethodistHealthSystem.org/Media to watch Tom and Debbie Youngblood share their story.
PATIENT STORY

Maria Casas is thankful for a new kidney so she can spend time with her family in Puerto Rico, including her husband, Jose Vilaró; her daughters, Ana Vilaró (not pictured) and Isabel Vilaró; and her new grandson, Julián Melero.

» FIND HOPE HERE

Learn more about transplant services available at Methodist Dallas at MethodistHealthSystem.org/Dallas-Transplant.
What if you lived in Puerto Rico last year and knew a hurricane would leave you without water or electricity for weeks or even months?

What if you also knew your chance for receiving a life-giving organ transplant depended on getting out before disaster struck?

Two transplant patients at Methodist Dallas Medical Center faced these difficult questions as Hurricane Maria rolled in.

**Ahead of the wave**

Miguel Talavera, MD, got the call to receive a combined liver-kidney transplant two days before Hurricane Maria made landfall on Sept. 20, 2017. He had been waiting since January.

“Dr. Talavera had end-stage liver and kidney disease, and significant to his surgical history, he’d also had two previous kidney transplants,” says Vichin Puri, MD, FACS, on the medical staff at Methodist Dallas. “He had also had open heart surgery to correct a cardiovascular issue before he could be eligible for another transplant, so he was lucky to be listed for these organs.”

When the call came, Dr. Talavera had six hours to get to Dallas, but airports were standing room only as tourists and locals tried to evacuate. None of the airlines were helping, despite Dr. Talavera’s medical needs.

“We called Methodist Dallas to cancel the transplant, but they encouraged us to keep trying,” Dr. Talavera recalls. Finally, an airport employee noticed their frustration and helped make the life-or-death connection to get Dr. Talavera to Texas. The next day, in a nine-hour surgery, Dr. Talavera received the new organs he’d been waiting for.

“Replacing his liver was our first priority,” Dr. Puri says. “It treats the liver disease, and it protects against rejection of the companion kidney. Survival rates for these kinds of transplants are excellent, at 75 percent or greater 10 years after surgery.”

Dr. Talavera jokes, “They call me ‘Mr. Refurbished’: three kidney transplants, one liver transplant, one coronary bypass.” But he is serious about what Methodist Dallas did for him.

“I have great trust in the physicians and staff,” Dr. Talavera says. “I probably would have given up in the airport without their support. They made me feel like part of a family. I recommend Methodist to everyone I can.”

**Riding out the storm**

While Dr. Talavera recovered comfortably on the mainland, Puerto Rico native Maria Casas faced her own care issue — finding a dialysis center that had electricity five days after the storm.

When dozens of Puerto Rico’s hospitals lost power after Hurricane Maria, rapper Pitbull sent his private plane to rescue people receiving chemotherapy and dialysis treatments. One of them was Methodist Dallas transplant patient Maria Casas.

“Thank God we’re blessed to help,” the performer humbly told a CNN reporter. “Just doing my part.”

---

**CONTINUED ON THE NEXT PAGE**
Maria has polycystic kidney disease (PKD), a genetic condition affecting the kidneys and liver. She had been waiting for a kidney transplant since starting dialysis in 2015.

“I never thought I would be able to get my transplant after the hurricane,” she says. “Everything at home was really bad.”

During treatment at a substitute dialysis center, an unexpected text message changed Maria’s life. A Florida-bound private jet (owned by rapper Pitbull, she later discovered) had space for her. She left dialysis immediately. Her younger daughter took her from dialysis to the airport, but unreliable cellphone reception made contacting anyone else difficult.

“My older daughter was eight months pregnant with our first grandchild, and my husband still thought I was at dialysis, so I had to go on my own,” Maria says.

Two weeks after arriving in Florida, a donor was identified for Maria. She flew to Dallas and had surgery at Methodist Dallas the following day.

Transplant nephrologist Jose “Tony” Castillo-Lugo, MD, on the hospital medical staff, monitors patients closely to guard against organ rejection.

“Patients with PKD respond very well to kidney transplants, because they typically don’t have complicating factors, like diabetes,” Dr. Castillo-Lugo explains. Additionally, anti-rejection medication has come a long way, lowering rejection rates to below 10 percent, compared to 70 percent in the early 1990s.

“Maria is one of the lucky ones,” he adds. “Had she stayed in Puerto Rico, she could still be waiting. We don’t know how many of those patients missed a transplant opportunity.”

‘The lucky ones’

Maria and Dr. Talavera are grateful for their transplants and the sacrifices that made them possible. “I am very thankful to Methodist Dallas and also to my donor and his family,” Dr. Talavera says. “They all gave me the opportunity to keep living and helping my family.”

Maria agrees. Two months after surgery, she was home and met her new grandson in person. “The staff at Methodist Dallas was so caring, bringing me something so positive,” she says. “I feel great, and I’m very, very happy.”
Not all illnesses have symptoms. That was the case with Larry Minter, DVM. The almost-50-year veteran of veterinary medicine had no reason to think about blood clots, blood thinners, or strokes — until a routine physical four years ago diagnosed him with atrial fibrillation (AFib).
Risk and reason
Patients with AFib, or irregular heart rhythm, are five times more likely to have a stroke than those without AFib. The reason has a lot to do with the left atrial appendage (LAA). The LAA is a small part of the heart’s left atrium. Every person has one, but for those with AFib, it poses a greater health risk.

Because of the fast and irregular heartbeat associated with AFib, blood can pool and coagulate within the LAA, forming a blood clot that can then travel to the brain and cause a stroke.

The treatment is usually a lifetime of blood thinners. But for some, like Dr. Minter, blood thinners cause severe bleeding issues. Over the last 3½ years, Dr. Minter experienced two significant gastrointestinal (GI) bleeds. It became evident that the blood thinners were hurting as much as they were helping.

“That’s when my cardiologist suggested the WATCHMAN™ implant so I could get off blood thinners,” Dr. Minter explained. “If I had another GI bleed, it could be severe.”

An alternative to blood thinners
Shaped like a hot air balloon, the WATCHMAN implant is inserted into the LAA where it expands and closes off this area of the heart.

Brian Lé, MD, FACC, cardiologist on the medical staff at Methodist Richardson Medical Center, has been treating conditions of the LAA since 2010. He says the WATCHMAN is ideal for patients with AFib not caused by a heart valve problem.

“It’s my go-to procedure,” Dr. Lé says. Via sheath access in the leg, Dr. Lé uses a catheter to travel up through a vein and to the LAA. Once at the LAA, the WATCHMAN is set into place and then tested for a tight seal over the LAA. Over the next few months, heart tissue grows over the WATCHMAN, completely sealing the LAA and eliminating the risk of blood clots. The procedure itself takes about an hour.

“The patient’s recovery is the best part,” Dr. Lé says. “Most are home the next morning without much pain or discomfort.”

Dr. Minter goes so far as to describe his WATCHMAN experience as “uneventful.” “There was no discomfort from the surgery. I just had to be perfectly still for the first 12 hours after the procedure and careful for the first week with lifting things so I didn’t disrupt the area.”

So long to blood thinners
At his 45-day checkup, Dr. Minter received good news. It was confirmed that the WATCHMAN was doing its job. The implant remained in place, and the heart’s tissue was already growing over it. Dr. Minter will continue to take a blood thinner for the first six months, but after that, he’ll be finished with the medications for good.

“It will certainly ease my mind if I have a GI bleed in the future,” he says. “It’s just the peace of mind of being off the blood thinners.”

For patients like Dr. Minter, the WATCHMAN procedure is a life-changer. But as Dr. Lé also explains, “The WATCHMAN is not only another option we offer patients to get them off blood thinners; it’s part of our commitment to finding the best care solutions.”

“IT WILL CERTAINLY EASE MY MIND IF I HAVE A GASTROINTESTINAL BLEED IN THE FUTURE. IT’S JUST THE PEACE OF MIND OF BEING OFF THE BLOOD THINNERS.
— LARRY MINTER, DVM

» IS WATCHMAN RIGHT FOR YOU?

While the WATCHMAN is suitable for patients of all ages, there are certain qualifications for consideration, including a patient’s risk for stroke, determined by a combination of several factors. To find a cardiologist at Methodist Dallas or Methodist Richardson Medical Center to see if WATCHMAN is right for you, go to MethodistHealthSystem.org/FindADoctor.
The WATCHMAN™ device is a left atrial appendage (LAA) implant for patients with atrial fibrillation (AFib) as an alternative to taking blood thinners.

Through a tiny incision, the physician inserts and threads a catheter via the right femoral vein into and across the heart's right atrium.

The doctor then makes a small puncture in the interatrial septum, the membrane that separates the right and left atria of the heart, allowing the catheter to continue into the left atrium and to the LAA.

The WATCHMAN implant, which resembles a hot air balloon, is deployed through the catheter and into the LAA.

The WATCHMAN inflates in the mouth of the LAA, sealing it off from the left atrium.

The physician then performs a series of tests that ensure a good seal, including a tug test and visualizations.

The catheter is then gently removed.

Over the next several months, heart tissue grows over the top of the WATCHMAN device (shown above). This process should completely seal and close the LAA, reducing the threat of developing blood clots.
Expertise and efficiency
NEW CARDIAC AND VASCULAR CLINIC OPENS AT METHODIST DALLAS TO MAKE ACCESSING HEART CARE EASIER

Methodist Dallas Medical Center is proud of its award-winning track record in cardiac care. Last summer, this legacy continued with the opening of the new Methodist Dallas Cardiac and Vascular Clinic (CVC).

The goal behind the clinic: to make care for heart patients more streamlined, effective, and convenient.

“Dallas, nationally, is one of the most competitive cardiac markets in the country,” says G. Mark Jenkins, MD, interventional and vascular cardiologist who has been on the medical staff at Methodist Dallas for almost 20 years. “Methodist and the physicians here must be able to do things in a coordinated manner to stay innovative in the field. This makes care more efficient, and the added resources give the patient a much better experience.”

The physicians at the new clinic have extensive experience in cardiology, electrophysiology, internal medicine, and interventional cardiology.

One of the main benefits to patients at the CVC is the seamless service. Before the clinic opened, patient records were hard to pass between the hospital and private practices, which really impeded the continuity of care. Now, all records are in one system and all notes are shared.

The new clinic offers many services, including:
- Consultations
- Follow-up visits from hospital cardiac procedures and treatments
- Preoperative clearances
- Diagnostic services, such as EKGs, ultrasounds, and stress tests
- Various heart procedures, including pacemaker and stent placements.

Physicians meet weekly with the director of the Sam & Anne Kesner Heart Center at Methodist Dallas. They discuss new goals and work together for the betterment of both the hospital and the new CVC by implementing this holistic approach to care.

Now, all the specialists in the hospital can refer their patients to the clinic.

WHERE DO YOU TURN FOR HEART CARE?

Consider Methodist Dallas, home to award-winning cardiology services. Learn more at MethodistHealthSystem.org/DallasCardio.
NOTICE OF NONDISCRIMINATION
Methodist Health System complies with applicable federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. Methodist Health System does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex.

Methodist Health System:

- Provides free aids and services to people with disabilities to communicate effectively, with us, such as:
  - Qualified sign language interpreters
  - Written information in certain other formats if available.
- Provides free language services to people whose primary language is not English, such as:
  - Qualified interpreters via a contracted service provider
  - Information written in other languages.

If you need these services, please ask your nurse, the house supervisor, or other hospital personnel for assistance.

Alternatively, you may call the hospital’s operator directly for assistance at the following numbers:

- Methodist Richardson Medical Center • 469-204-1000
- Methodist Mansfield Medical Center • 682-242-2000
- Methodist Dallas Medical Center • 214-947-8181
- Methodist Charlton Medical Center • 214-947-7777

for assistance at the following numbers.

Alternatively, you may call the hospital’s operator directly for assistance.

Written information in certain other formats if available.

Qualified sign language interpreters via a contracted service provider.

Complaint forms are available at

Methodist Health System: 3101 Gaston Ave., Dallas, TX 75246
Methodist Richardson Medical Center: 469-204-1000
Methodist Mansfield Medical Center: 682-242-2000
Methodist Dallas Medical Center: 214-947-8181
Methodist Charlton Medical Center: 214-947-7777

or at discriminationcomplaints@mhd.com.

If you believe that Methodist Health System has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, please discuss this with your care team, or you can file a grievance (complaint) with:

Methodist Health System’s Discrimination Grievances Coordinator via phone messaging at 214-847-8119 or email at discriminationcomplaints@mhd.com.

You can file a civil rights compliant with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal, available at hhs.gov/ocr/office/file/index.html.

Complaint forms are available at


NOTICE OF PROGRAM ACCESSIBILITY
ATTENTION: If you speak English, language assistance services, including TTY, are available to you free of charge:

Methodist Charle open Medical Center • 214-847-7777
Methodist Dallas Medical Center • 214-847-8181
Methodist Mansfield Medical Center • 682-242-2000
Methodist Richardson Medical Center • 469-204-1000

If you believe that Methodist Health System has failed to provide these services or discriminate in another way on the basis of race, color, national origin, age, disability, or sex, please discuss this with your care team, or you can file a grievance (complaint) with:

Methodist Health System’s Discrimination Grievances Coordinator via phone messaging at 214-847-8119 or email at discriminationcomplaints@mhd.com.

You can file a civil rights compliant with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal, available at hhs.gov/ocr/office/file/index.html.

Complaint forms are available at


Texas law prohibits hospitals from practicing medicine. The physicians on the Methodist Health System medical staff are independent practitioners who are not employees or agents of Methodist Health System, or any of its affiliated hospitals. Methodist Health System complies with applicable federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex.
QUADRUPLE BYPASS HELPS LOCAL PHOTOGRAPHER REACH NEW HEIGHTS

At the top of Texas
Hiking Guadalupe Peak — 8,749 feet and Texas’ highest natural point — is one of Mark Frankie’s proudest accomplishments. But the fourth time he took that hike was the most meaningful. The hike occurred just 10 weeks after open heart surgery. Without the lifesaving care he received at Methodist Mansfield Medical Center, the professional photographer and avid hiker might not have had the chance to make that climb, let alone reach the summit.

Care at its peak
Despite his good physical shape, shortness of breath and inexplicable weakness last summer sent then-65-year-old Mark to Methodist Mansfield for immediate cardiac care. His initial consultation revealed 98 percent blockage of four arteries. Mark was referred to Darien Bradford, MD, cardiothoracic surgeon on the medical staff at Methodist Mansfield, for coronary artery bypass graft (CABG) surgery.

CABG involves relocating an artery from the left side of the chest wall and a vein from the lower leg and connecting (grafting) them to the existing coronary arteries to reroute blood to the heart, bypassing the original blocked arteries. Mark’s surgery was “off pump,” meaning his heart remained beating during the procedure. This method is performed by only a select group of surgeons nationwide. “Off-pump surgery helps reduce the risk of complications after surgery and allows immediate confirmation of the surgery’s success,” Dr. Bradford says.

Expert care in the hospital’s Amon G. Carter Foundation Heart and Vascular Center laid the foundation for Mark’s fast-paced recovery. Advanced practice nurses are specifically trained in caring for cardiac surgery patients and cross-trained in other surgical specialties, as well. Plus, patients stay in the cardiovascular intensive care unit from admission to discharge, which supports greater continuity of care and helps to build relationships between patients and staff.

“Our goal is to be the best in the nation, and we are well on our way,” Dr. Bradford says.

The trail to recovery
After surgery, Mark continued his previous healthy habits. “The doctors prepared me about what to expect, which really helped with my recovery,” he says. “They were also very clear that the sooner I got moving, the better I would heal.”

He took their advice. He did his fair share of walking while on a trip to Mexico to photograph his son’s wedding just two weeks after surgery and on a camping trip in New Mexico one month later. It was on that trip that he and his wife decided to again tackle Guadalupe Peak.

Mile-high reflections
Mark still gets emotional recalling his mountaintop experience from that defining hike.

“All the way up, I kept thinking about the amazing gift Dr. Bradford and Methodist Mansfield gave me,” he says. “I want people to understand that you can have this procedure and come out better than you went in.”

Dr. Bradford agrees: “Recovery is a lifelong process for a heart patient. It’s not one of those things that’s fixed immediately and everything changes. Mark gets that. You wish you could put him on a billboard to say, ‘This is what you have to look forward to.’”

Watch Mark Frankie share his story, along with insight from Dr. Bradford, at MethodistHealthSystem.org/Media.
He had just hit the best drive of his life. It was looking to be a great day on the golf course for Eddie Sutton.

But when it came to the second shot, he couldn’t get the ball on the green. He suddenly lost his breath. Shortness of breath wasn’t new. It had happened before, but Eddie was always able to catch his breath again. Not this time. Then the pain hit and became so severe that Eddie asked a friend to take him back to his car.
A heart under attack
Eddie did what he should not have done. Instead of calling 911, he drove himself home from the golf course. The pain was so severe that when he passed a policeman along the way, he wondered if he should stop to ask for help. But he didn’t.

By the time he got home, the realization hit: He was having a heart attack. Eddie called 911, then made his way to the front door and waited for the paramedics to arrive. His saw his life flash before his eyes.

“It’s like what you hear others say,” Eddie recalls. “I sat there and understood that I might die. I thought of my wife, my life, and had a conversation with the Lord.”

When the paramedics arrived, they went straight to work, quickly rushing him to Methodist Charlton Medical Center. His situation was so severe that the medical team didn’t have time to sedate him.

“The next thing I know, they started working on me,” he says. “I was conscious through the whole thing. They talked me through it, and before I knew it, it was over.”

A fast response
What Eddie didn’t know at the time was that he was having an ST-segment elevation myocardial infarction (STEMI), the most serious form of heart attack. During a STEMI heart attack, 100 percent of the coronary artery is blocked, completely cutting off blood supply from a large portion of the heart muscle. It is critical to restore blood flow as quickly as possible.

Fortunately, Eddie had a door-to-balloon time of only 11 minutes. The American Heart Association recommends 90 minutes or less. Door-to-balloon time is measured from when a heart attack patient arrives at the hospital to the time blood flow is restored to the heart.

Within 11 minutes, Eddie received a lifesaving procedure thanks in part to the quick action of Methodist Charlton’s emergency department. Ryan Tillman, MD, was the emergency medicine attendee that day and recognized Eddie’s symptoms. The team quickly confirmed a heart attack with an EKG and administered medications — nitroglycerin, aspirin, and a blood thinner — before getting Eddie to the cardiac catheterization lab for surgery.

The quick response not only saved Eddie’s life but prevented further heart damage.

“Every single minute can result in dying heart cells,” Dr. Tillman says. “The quicker you can get a patient into surgery, the quicker you can prevent damage.”

Eddie received a stent in the artery to reestablish blood flow. The effect was immediate.

“It was like a stone had been lifted from my chest, and I could breathe,” Eddie says.

“The whole experience was eye-opening,” he adds. “I don’t smoke anymore, and I can breathe a lot better. My life is great. Methodist Charlton made a bad situation good. I can spend my life with my wife and grandkids and live a productive life.”

Eddie Sutton takes to the green with ease after lifesaving heart surgery at Methodist Charlton.
When you’re on the mend, a mother’s care is hard to beat. So in January 2017, when South Carolina resident Tom Kohler was recovering from hernia repair surgery, he asked his surgeon if he could finish recuperating at his mother’s home in Arlington, Texas. He got the thumbs-up and made the trip. But less than two days after arriving, the doctors and nurses at Methodist Mansfield Medical Center were fighting to keep him alive.

Unexpected emergencies
Incessant vomiting, fear of dehydration, and an ugly-looking incision site are what urged Tom and his mother, Deborah Kohler, to turn to Methodist Mansfield. There Tom was diagnosed with an infection and admitted to the hospital. But just as he was settled, he vomited so violently that all 21 staples in his abdomen gave way.

“The last thing I remember is looking down and seeing my stomach split open,” Tom says.

Jeremy Parcells, MD, FACS, general surgeon on the hospital medical staff, walked in the room and immediately made the decision to take him straight to the operating room. Dr. Parcells cleaned up the open incision, removed mesh from the original hernia procedure that had already torn away, and placed a temporary dressing.

His plan was to stabilize Tom for a definitive repair the next day. However, Tom didn’t make it till then.

Prepared for the worst
That night around 1 a.m., the muscles near Tom’s hernia repair tore further, and he began bleeding out. As Dr. Parcells rushed back to the hospital, the intensive care unit (ICU) nurses and blood bank team stepped in, transfusing blood to keep him alive until Dr. Parcells could take Tom back to the operating room and stop the bleeding.

“When we as a hospital decided to pursue a trauma designation, we knew it would require strengthening...”
a number of processes,” Dr. Parcells says. “So over the previous months, the team, including our trauma program manager and blood bank, had worked together to more rapidly deliver blood transfusions to critically ill patients. For certain emergency patients, those few minutes can be a matter of life and death. In my opinion, Tom was minutes away from dying.

“He may not have arrived at the hospital as a trauma patient, but his is the first life saved by our trauma program.”

During the next few days, Tom had four more surgeries to remove 3 feet of dying intestine, clean out the infection, and finally close his abdomen.

Meanwhile, Tom’s wife, Jamie, and 15-year-old daughter, Samantha, traveled from South Carolina to be with Tom.

“Once I was out of the ICU, Dr. Parcells spent an hour and a half with us answering questions and explaining everything that had happened,” Tom says. “He was upbeat and reassured us everything would be okay.”

Tom was released Feb. 20, but for the next two months, he had twice-weekly wound treatments to help heal the surgical site. Finally, in April he drove home to South Carolina.

**Back in Texas**
While Tom was on the mend, he was still at high risk for developing another hernia. Dr. Parcells urged him to lose weight (obesity is one of the greatest risk factors for hernias) and plan for an abdominal reconstruction surgery later that year. Tom followed doctor’s orders, losing more than 50 pounds and returning to Methodist Mansfield in November. The surgery was a success, and both Dr. Parcells and Tom hope it’s the last surgery he’ll ever have.

“I came back to Methodist Mansfield because these are the people I trust,” Tom says. “Dr. Parcells says he has a piece of his soul inside me — a combination of the staff and everyone else involved in my care.”

That team effort is echoed by Dr. Parcells.

“Tom is alive because dozens of people worked together to save his life,” he says. “I’m just so grateful that we were able to take care of him.”

**BLOOD DRIVES SAVE LIVES**
Methodist hospitals host blood drives throughout the year. Join us on Fridays, May 25 and Aug. 3, from 10 a.m. to 1 p.m., at Methodist Mansfield Medical Center to make a donation that could save a life. The hospital is located at 2700 E. Broad St. in Mansfield, and the blood drives will be in Classroom A/B.
A GAME CHANGER FOR GUYS

A NEW PROCEDURE RELIEVES ENLARGED PROSTATE ISSUES WITHIN AN HOUR

There is a condition affecting millions of men — and now Methodist Dallas Medical Center is the place for them to find relief.

The condition is benign prostatic hyperplasia (BPH), more commonly called enlarged prostate. In 2010, as many as 14 million men had symptoms of the condition.

“BPH is the most common prostate problem for men over 50,” says Jeffrey Toubin, MD, urologist on the medical staff at Methodist Dallas. “Its cause is not well understood, but we do know it’s related to the aging process and the effect of testosterone over time. In addition, men with a family history of BPH; medical conditions, such as obesity and heart disease; lack of physical exercise; or erectile dysfunction may be more likely to develop this condition.”

The most noticeable symptoms have to do with a man’s urinary habits — frequent urination, incontinence, and inability to urinate, to name a few.

While BPH is a benign condition and unrelated to prostate cancer, it can greatly affect a man’s quality of life.

Introducing UroLift™

Dr. Toubin says most physicians first try treating BPH with medication, but sometimes patients don’t find relief or experience unwanted side effects. This is when the UroLift System is an ideal option.

The UroLift System treatment is an advanced minimally invasive approach that holds the prostate tissue out of the way so it no longer blocks the urethra. There is no cutting, heating, or removal of prostate tissue — just tiny implants inserted via the urethra that hold the prostate lobes apart.

Why a game changer?

Dr. Toubin explains that other BPH surgical procedures cut pieces of tissue off the enlarged prostate. Patients may need to stay in the hospital for a couple days to watch for bleeding. Even with a successful surgery, there is an increased risk of incontinence and sexual dysfunction.

UroLift, however, can be performed on an outpatient basis with minimal downtime and a rapid return to a normal routine. Plus, it does not negatively impact sexual function, says Dr. Toubin, who was named a UroLift Center of Excellence in November 2017, the only one in North Texas.

“Almost 200 patients have had the UroLift procedure at Methodist Dallas and have been extremely happy with the results,” Dr. Toubin says. “It is a highly effective treatment for BPH without the drawbacks of past options.”

» GET A CLOSER LOOK

Go to youtube.com/MethodistHealthDFW to see an animation of how UroLift works.
Decoding dad’s DNA
HOW YOUR FATHER’S HEALTH MIGHT AFFECT YOURS

Do you have your mom’s smile and your dad’s blue eyes? Although we inherit certain physical traits and health risks from both of our parents, some we can attribute specifically to dad’s gene pool.

Kelly Farris, MD, family physician at Methodist Family Health Center – Murphy, says male-pattern baldness is a physical trait that men pass on to their sons. “If a father has male-pattern baldness, his son is five times more likely to have it than men whose dads don’t have it,” he says.

In terms of more serious medical conditions, men with a first-degree relative who had prostate cancer are two times as likely to get the disease as men without this family history. Prostate cancer is the second-leading cause of cancer death in American men, but little is known about the genetic predisposition of some men to the disease. Numerous studies point to a family history of the disease as a major risk factor, which may be responsible for an estimated 5 to 10 percent of all prostate cancers.

A look back at your family tree
Properly assessing a patient’s risk for inherited health conditions depends on a family medical history, Dr. Farris explains. While talking with his patients, he reviews the major diseases, such as heart disease, cancer, and diabetes, that have occurred in recent generations and checks the patients’ cholesterol levels. He notes any genetic red flags that come up during the discussion.

“If a patient’s grandfather and father died of heart attacks in their 40s or 50s, for example, that’s outside the norm,” Dr. Farris says. “In that instance, I would start to think about genetic risk factors to look for. If I have more concerns, I would refer that patient to a genetic specialist.”

He adds that any inherited diseases have a genetic component that can be affected by environmental factors. “Let’s say your dad had heart disease,” Dr. Farris says. “If he smoked and rarely exercised, his lifestyle had more of an impact on his health than any genetic defect he may have had. I tell patients that if they eat right, exercise, and live a healthy lifestyle, they can help prevent those diseases that run in their family.”

Once you talk to your dad about his family medical history, make time to share that information with your primary care provider. To find one with Methodist Health System, go to MethodistHealthSystem.org/Primary-Care.
The Rev. Roberto Gomez is thriving after advanced treatment for liver cancer.
“God keeps doing miracles” is a message on the website of Iglesia Jesucristo Es Mi Refugio (Jesus Christ Is My Refuge Church) in Dallas, where the Rev. Roberto Gomez has served as pastor for 25 years.

The words were also a personal reminder to the church founder, encouraging him through liver cancer treatment at Methodist Dallas Medical Center.

Even with an evangelical spirit and his life’s hope rooted in God, Roberto was at first nervous and hesitated to undergo treatment. But his initial diagnosis was a triple threat: cirrhosis of the liver, hepatitis C, and hepatic (or hepatocellular) carcinoma, which accounts for most liver cancers.

“For Roberto, faith and medicine had to combine,” says Islam Shahin, MD, interventional radiologist on the medical staff at Methodist Dallas.

“Smart bombing” tumors
“In the United States, chronic hepatitis C is the most common cause of liver cancer,” says Parvez Mantry, MD, AGAF, FAASLD, medical director of the hepatobiliary tumor program with The Liver Institute at Methodist Dallas. Roberto was referred to Dr. Mantry, who recommended a relatively new treatment called Y-90 radioembolization.

“The best metaphor for Y-90 is ‘smart bombing,’ in which the technology tries to destroy the tumors and kill the cancer,” explains Dr. Shahin, who oversees the treatment.

The Y-90 technology is a minimally invasive outpatient procedure that uses a catheter to target the blood vessels feeding into a tumor. Through that procedure, tiny, radioactive glass or resin beads are injected directly into the tumor without harming or minimizing damage to the surrounding healthy tissue.

“The treatment lasts about an hour, but the patient usually comes for mapping beforehand to find out exactly where the tumors are in the liver,” Dr. Shahin says.

Then the ‘smart bombing’ begins. For some patients, it only takes one round of Y-90 treatment to destroy their tumors. For more stubborn tumors, treatments are easily repeatable, staying tough on tumors but gentle on the surrounding areas.

Nothing lost, something gained
Despite his previous anxieties, Roberto is glad he received the Y-90 treatment. Faith and medicine combined turned out to be the perfect prescription for the 59-year-old.

“‘I would recommend the procedure to others who have the opportunity,” he says. “It worked better than expected because the tumors were so large and had spread quickly.”

While a successful treatment, Y-90 technology isn’t for every patient. Dr. Shahin advises it as a treatment primarily for those with stage IV liver cancer and colorectal cancer. It’s also a treatment option for patients who have

continued on the following page >>
Liver cancer is on the rise — especially in Texas, where it leads to more deaths than in any other state in the union. With that trend expected to continue until at least 2030, here are four ways Methodist Dallas Medical Center is standing out in the fight for lives at risk.

1. We take a multidisciplinary approach. “Each week, a team of experts from the fields of hepatology, interventional radiology, surgery, cross-sectional radiology, and oncology meets to discuss all our liver cancer patients and prepare treatment plans that consider all aspects of their diagnoses,” says Parvez Mantry, MD, AGAF, FAASLD, executive medical director of the Methodist Health System Clinical Research Institute and medical director of the hepatobiliary tumor program with The Liver Institute at Methodist Dallas. “Our approach draws patients from all over Texas for management of their complex illnesses.”

2. We participate in clinical trials. “People often believe that liver diseases are only caused by alcohol abuse, but the most common causes of liver cancer are chronic infections with the hepatitis C virus and a condition called NASH (nonalcoholic steatohepatitis),” Dr. Mantry says. To help stop cancer before it starts, Methodist Dallas chose to actively participate in several clinical trials to cure hepatitis C and treat NASH at various stages.

3. We watch out for at-risk patients. The specialists at The Liver Institute implement and educate primary care physicians about monitoring patients at risk for liver cancer. They recommend ultrasound screening for these patients every six months, as well as screening with other imaging technology when needed.

4. We advocate for lifestyle changes. Dr. Mantry says the increased mortality rates in Texas, in particular, are driven by other health conditions, such as diabetes and obesity, which are prevalent in this state. In fact, these conditions lead to NASH and its dangerous cousin, fatty liver disease.

As for Roberto, he is thriving and surviving, spreading his messages of faith and hope from his church in Oak Cliff.

One of his sermons is titled “Recover What You Have Lost,” but Roberto will tell you he didn’t lose anything. He gained a chance at survival.

» SHOULD I BE SCREENED?

If you have liver disease or are at risk for liver cancer, learn more about The Liver Institute at MethodistHealthSystem.org/Liver-Institute or by calling 877-4A-LIVER (877-425-4837).

» GIVING HOPE

Learn more about the lifesaving work of the Methodist Digestive Institute at MethodistHealthSystem.org/MDI.
Creatures for the cure
BELIEVE IT OR NOT, MAGGOT THERAPY MAKES A DIFFERENCE IN WOUND CARE

Vera Kennerson never imagined that the key to healing a gaping wound would involve maggots. It sounds archaic — even disgusting — but Vera will be the first to admit that it was worth it to have an open mind. The 76-year-old Grand Prairie mother and grandmother wasn’t in pain — nerve damage from diabetes had seen to that — but she could smell her own flesh decaying in the wound.

“If you walked in the room, you could smell it, it was so pungent,” she says.

Surgery seemed the only option for clearing the dead tissue, but coupled with Vera’s other health issues, it could put her life at risk.

Fortunately Leslie Dillard, BSN, RN, CWON, CFCN, stepped up with the natural alternative of maggot therapy.

A ‘natural’ way to heal wounds
Dillard is a wound and ostomy continence nurse at Methodist Mansfield Medical Center, and over the past five years, she’s been involved with Vera’s care. In early 2017 at a wound care conference, she was reminded of the effectiveness of maggot therapy.

“Maggots have been used for 40 years, but new research further supports it as a good therapy for cleaning necrotic, or dead, tissue and preventing patients from needing surgery,” Dillard says.

Dillard says the procedure is sanitary and approved by the U.S. Food and Drug Administration. The maggots are sterile-grade and specially ordered from a medical supply company.

“They only eat the dead tissue, which has no nerve endings, so it’s not painful at all,” she adds.

Trusting in compassionate care
“I trust Leslie, so when she explained how this therapy could help, I thought it was all right,” Vera says. “It never bothered me. No one can believe now that my wound is almost gone.”

Dillard started Vera’s maggot therapy on May 26, 2017, and just four days later, she was able to remove a large flap of dead skin. The wound care team then began using negative pressure wound therapy to help generate new skin.

What started as a wound that was 26 centimeters wide, 32 centimeters long, and 17 centimeters deep is now the size of a quarter in its last stages of healing.

“Mrs. Kennerson knew we had her best interests at heart and fully trusted us for her wound care,” Dillard says. “She was a great patient and thankful that we were able to save her from surgery and increase the likelihood of her wound healing.”

» FIND HEALING HERE

Learn more about advanced and innovative wound care available at Methodist Health System at MethodistHealthSystem.org/Mansfield-Wound.
Methodist Richardson breaks ground on first phase of expansion

With the turn of a few shovels, Methodist Richardson Medical Center officially broke ground on its $85 million expansion Thursday, Jan. 25. Construction is underway on the seven-story parking garage that will be located on Renner Road. The 671-space structure is expected to open in October. The vertical expansion of floors 5 and 6 will ultimately add 150 all-private, acute care beds.

Included in the expansion was the construction of the hospital’s ninth operating room. It opened in March and is home to the hospital’s new da Vinci® Xi surgical robot.

The grand opening celebration included the mayors from Richardson and Wylie, as well as local chamber and city leaders. Representatives from the Methodist Health System Board of Directors, Methodist Richardson Advisory Board, and Methodist Richardson Medical Center Foundation Board of Directors also attended.

“We’re excited to be growing to keep up with our growing communities,” says President Ken Hutchenrider Jr., FACHE. “It’s an honor to be their trusted healthcare provider.”

GOING FOR GOLD:
When 17-year-old Olivia Castro was deciding what she wanted to do for her Girl Scout Gold Award project, she immediately thought about a project that would benefit the Methodist Richardson Cancer Center, where her mom, Cynthia Castro, works. Olivia spent 90 hours creating several different art projects that patients can do while undergoing treatment. She raised almost $500 to buy supplies and containers to store the projects. Olivia is a high school senior who is bound for the University of Texas at Dallas in the fall.

HOW DOES YOUR GARDEN GROW?
If you attended Methodist Generations’ free Garden2Table event at Methodist Dallas on April 7, hopefully rather well! This event welcomed local organizations to teach about gardening in an urban environment, as well as preparing and preserving the fruits of your green thumb. Above, Cassondra Armstrong of Master of Culinary Concepts, LLC, shares healthy eating and food preparation tips.

HELP FOR OVERCOMING STRESS: On Feb. 28 at the Cedar Hill Government Center, Methodist Charlton Medical Center hosted a Lunch and Learn for employees with the city of Cedar Hill on “Achieving Emotional Wellness Success in the Midst of High Stress.” Lawana Gladney, PhD, the “Emotional Wellness Doctor” (shown at left), taught how to achieve emotional wellness and the keys and strategies to living an emotionally healthy and balanced life.
WE HAD A BLAST AT HEART2HEART: On Feb. 17, Methodist Charlton hosted its annual Heart2Heart event. Emmy® award–winning WFAA journalist Sonia Azad emceed the event featuring Roger Williams, a multiple heart attack and open heart surgery survivor. Guests enjoyed Fish Sticks Comedy entertainment, physician panels, and a cooking demonstration by Tyson Bohoney (shown at right). Later, everyone celebrated the grand opening of the new Heart Failure Clinic.

HAPPY BIRTHDAY, DR. SEUSS! Methodist Dallas and Methodist Mansfield were proud to partner with local elementary schools on Dr. Seuss’ birthday in early March. At Methodist Dallas, employees went to James S. Hogg Elementary School to read some of their Seuss favorites, like Horton Hears a Who! and Oh, the Places You’ll Go! (photo below). Methodist Mansfield teamed up with Martha Reid Elementary School for a book drive to collect books for the hospital’s Read to Me program (photo above). Read to Me provides each infant born at the hospital with a book to help babies get a head start on reading and a lifetime of literacy.

SAVING LIVES THROUGH EARLY DETECTION: Hospital employees and visitors were invited to take a tour through a giant, inflated colon March 2 at Methodist Mansfield to bring attention to National Colorectal Cancer Awareness Month. The public got close-ups of polyps and unhealthy tissue that can occur within the organ. With regular screening and early detection, colorectal cancer is preventable and the most curable form of cancer. Take a free, online colon cancer risk assessment at SmartColonScreen.com.
Here's the Scoop

A Healthier Approach to Frozen Treats

A fun and delicious way to cool down in the summer is with a frozen dessert. The options are endless, whether you’re going out with the family, buying at the grocery store, or making at home. Carey Shore, MS, RD, LD, wellness coach and program coordinator at both Methodist Dallas and Methodist Richardson Medical Centers, shares that one option isn’t necessarily better than another.

“If you don’t have any sort of dietary limitations, you can easily enjoy any frozen dessert you like,” Shore says. “What’s important to keep in mind, though, is portion control. You can have too much of a good thing!”

The average serving size for frozen desserts is only one-half cup so you want to make it count. Here are some tips for finding that perfect dip for your nutrition goals.

Ice cream
The classic sweet treat is packed with nutrients, such as calcium, potassium, and vitamin D. The dietary concerns with this choice come from ice cream having up to 16 percent milk fat, which consists of mostly unhealthy saturated fats. It’s also packed with sugar, increasing risk for weight gain, diabetes, and high blood triglycerides.

Sorbet
Sorbet inherently do not have dairy. This treat is the least creamy and focuses on fruity flavors. For someone working on his or her waistline, this is a great option. Sorbet is fat-free and clocks in at around half the calories of ice cream. Do take note of its high sugar content, though.

Gelato
This smooth, silky treat contains only 5 to 7 percent milk fat and doesn’t typically contain eggs. Unfortunately, it is high in sugar, so it’s not the best option if you have diabetes.

Alternative ice creams
Frozen desserts made with soy, coconut, and almond milks are good news for people who are vegan or have certain food allergies. While these desserts may not be as high in fat and sugar as ice cream, they are still not necessarily good for you.

Diet ‘ice cream’
Fewer calories, less sugar, lactose-free, gluten-free, added protein — many brands have found ways to make over ice cream to fit certain dietary needs. While they don’t fit the definition for traditional ice cream (at least 10 percent milk fat), they can still be delicious options for people with certain dietary restrictions or goals.

Treat Yourself!
Here are some of our favorite stops for frozen treats!

Steel City Pops: Locations in Dallas, Garland, and Fort Worth steelcitypops.com
Encanto Pops: 831 W. Davis St., Dallas, TX 75208 encantopops.com
Melt: 1201 W. Magnolia Ave., Suite 115, Fort Worth, TX 76104 melticecreams.com
Berrynaked: Locations in Dallas, Plano, and Richardson berrynaked.com

Carey Shore, MS, RD, LD, wellness coach and program coordinator at both Methodist Dallas and Methodist Richardson Medical Centers, shares that one option isn’t necessarily better than another.

“Whatever you choose, try to keep portions small and enjoy in moderation!” Shore says.

Summertime means family vacations, backyard barbecues, and nutritious eating.

Now that you’re ready to make the most of summertime, it’s time to eat up the nutritious recipes featured in this month’s nutrition tips.

Summer Wellness
Tallan Askew has played and coached many games. When he was 28, he suffered a stroke. Thankfully, he came to Methodist Dallas Medical Center, now a Certified Comprehensive Stroke Center, capable of handling the most complex stroke cases. Since undergoing advanced stroke treatment and brain surgery, he’s able to get back on the field and back to his family. Trust. Methodist.

“I can walk, I can talk, and I’m back with my daughter. I don’t care if I get a cold, I think I’ll drive to Methodist Dallas. I don’t have words to describe them, they were just fantastic.”

— Tallan Askew

For more information, visit MethodistHealthSystem.org/Stroke