The perfect fit
What 3D imaging is doing for joint replacement

We’re growing!
New Methodist Health System locations to serve you

Designer diets
No matter your health struggle, there’s a diet right for you

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A tragic trampoline accident put Skip Redd at risk for lifelong paralysis. Read how the team at Methodist Dallas has this choir teacher moving to the music again.
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Spice things up!
It’s that time of year for breaking out some of your favorite spice jars, including cinnamon. This ingredient isn’t just famous for its flavor. It also has some powerful health benefits — boosting the immune system, preventing cancer, maintaining brain function, and so much more. Check out our Shine Online blog at MethodistHealthSystem.org/Blog for a more thorough rundown of how healthy cinnamon can be, as well as some ways to work it into your diet all year round.

Have you saved the date for your annual mammogram?
There’s no better time than now, with National Breast Cancer Awareness Month just around the corner in October, and there’s no more relaxing way than at Monday Night Mammos at Methodist Dallas Medical Center. Enjoy a massage, hors d’oeuvres, and immediate results from our advanced 3D mammography. Learn more — and check out a brand-new video about this service — at MethodistHealthSystem.org/Media.

Get up and give for North Texas Giving Day!
Thursday, Sept. 20, is a great day to jump online and support your favorite local nonprofits, including Methodist Health System Foundation and Methodist Richardson Medical Center Foundation. These organizations help support the lifesaving work of our hospitals and clinics. North Texas Giving Day runs from 6 a.m. to midnight, and every gift makes a difference in the lives of our patients. Give on Sept. 20 at northtexasgivingday.org.
Events

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

METHODIST RICHARDSON NICU REUNION
Saturday, Sept. 15, 11 a.m. to 2 p.m.
Bistro, Methodist Richardson Medical Center, 2831 E. President George Bush Highway, Richardson, TX 75082
Join us as we welcome back babies who spent time in the Methodist Richardson Neonatal Intensive Care Unit (NICU).
Enjoy games, entertainment, refreshments, and fellowship with other NICU families.
>> Sign up your family today at MethodistHealthSystem.org/Richardson-NICU.

DALLAS BIKE RIDE
Saturday, Nov. 3, 8 a.m.
City Hall Plaza, 1500 Marilla St., Dallas, TX 75201 (location of ride start and finish)
Don’t miss the city’s only car-free, recreational bike ride, with miles of car-free streets, on-course entertainment, rest stops with snacks, and the Methodist Dallas Finish Festival, complete with giveaways and a free post-ride yoga session by a Methodist Dallas yoga instructor. Choose between a 20-mile and a 10-mile closed-road course.
>> Only $55 with the discount code METHODIST18. Children ages 3 to 7 are free; ages 8 to 17 are half-price. Register now at dallasbikeride.com.

HOLLY DAYS
Saturday, Nov. 10, 8 a.m. to 5 p.m.
Lobby, Methodist Mansfield Medical Center, 2700 E. Broad St., Mansfield, TX 76063
Begin your holiday shopping at the Methodist Mansfield Auxiliary’s 13th annual Holly Days Christmas Market. The market offers a variety of unique gifts, including home décor, clothing, jewelry, baked goods, and much more! Pictures with Santa run from 11 a.m. to 4 p.m., and event proceeds benefit Methodist Mansfield.
>> For more information, call Jody Tolar at 682-242-7301.

FRESHSTART® SMOKING CESSATION PROGRAM
Fall series start Mondays, Sept. 10 and Nov. 5, 6 p.m.
Weatherford Room, Methodist Dallas Medical Center, 1441 N. Beckley Ave., Dallas, TX 75248
Freshstart is the American Cancer Society’s group-based tobacco cessation counseling program. You’ll help create a program tailored to your lifestyle and gain the tools to break the habit. This free series meets once a week for four weeks.
>> For more information or to register, call Maiya Bangurah at 214-947-1768.

SANTA’S VILLAGE
Fridays, Saturdays, and Sundays, Dec. 1 to 16, 6 to 9 p.m.
Richardson City Hall, 411 W. Arapaho Road, Richardson, TX 75080
Santa’s Village, a tiny town of 16 holiday dwellings, is a Richardson holiday tradition, and Methodist Richardson is proud to once again be a part of it. Come explore the colorful buildings, including Methodist Richardson’s Santa’s Beary Good Hospital.
>> Learn more at cor.net/santasvillage.

THE MAD HATTER TEA PARTY AT METHODIST RICHARDSON
Saturday, Sept. 22, 10:30 a.m. to 1 p.m.
Bistro, Methodist Richardson Medical Center, 2831 E. President George Bush Highway, Richardson, TX 75082
Don’t be late for this very important date as we celebrate breast cancer survivors and fighters. Come relax with a pampering massage and makeover, and do stay for a spot of tea, won’t you?
>> Register today at MethodistHealthSystem.org/Mad-Hatter.

METHODIST CHARLTON FALLING FOR PINK
Saturday, Sept. 29, 10 a.m. to 12:30 p.m.
Auditorium, Methodist Charlton Medical Center, 3500 W. Wheatland Road, Dallas, TX 75273
All breast cancer patients, survivors, and caregivers are welcome to this free event! In addition to hearing the amazing stories of survivors, attendees will enjoy:
• Pink Carpet Walk
• Cancer-fighting cooking and fitness demonstrations
• Multidisciplinary physician panel from Methodist Charlton’s nationally accredited Breast Center of Excellence
• Opportunities for mammograms prior to the event and free bra fittings immediately following the event (both by appointment only).
>> Register today by calling 972-992-7621 or go to FallingForPink.com.

METHODIST MANSFIELD PRETTY IN PINK
Saturday, Sept. 29, 10 a.m. to noon
Women’s Center, Methodist Mansfield Medical Center, 2700 E. Broad St., Mansfield, TX 76063
Join us for a pink event celebrating women, cancer survivors, and women fighting breast cancer. Enjoy keynote speaker Starlene Stringer from KLY, a delicious lunch, and a physician panel to answer all your questions on women’s health.
>> Seating is limited. Register now at MethodistInPink.com.
Fads come and go, but eating nothing but soup to lose weight seems to live on. While not recommended as a long-term alternative, replacing some meals with soup is a great way to save on calories, add extra veggies to your diet, and hydrate yourself, says Heather Beard, RD, LD, CDE, at Methodist Richardson Medical Center. “It’s fine to do short term,” Beard says. “People just need to make sure they’re getting enough protein. I recommend they meet with a registered dietitian to figure out how to do it healthfully for them.”

Beard says there are definitely some pros to eating soups:
• They’re filling and nutritious.
• They can be packed full of cooked veggies, which can be more palatable than eating a lot of raw vegetables.
• They’re great for hydration: “People will get a lot of water, which sometimes can be as satisfying as eating a hamburger,” Beard says.

Skipping the soup
Certain people should avoid canned soups, though, including those with kidney or heart disease, Beard says. “The reason is because these soups tend to be really high in sodium. An option is that you can buy lower-sodium options or make them at home,” she adds.

Beard also stresses the importance of avoiding soups high in saturated fats when trying to lose weight. “Steer clear of the ones that are creamy, cheesy, or have things like added bacon,” she says. “Buyer beware on the fat content.”

A little extra guidance
And for those who have successfully lost weight by making soup a staple in their meal planning, Beard recommends meeting with a registered dietitian to figure out how to maintain your weight loss.

“With any diet that restricts you to a certain type of food, it’s just hard to do that long term,” she explains. “A professional can help you put together a meal plan that is sustainable for continued use.”

Overall, replacing a few meals a week with soup isn’t a bad choice because it is a lower-calorie option, Beard says. “I just want to discourage people from going to extremes, like doing all soups for long periods of time.”

» 3 SOUPS YOU’VE GOTTA TRY

Find three delicious, healthy, seasonal soup recipes on our Shine Online blog at MethodistHealthSystem.org/Blog.
Fall means back to school, the start of football season, and the return of the pumpkin spice latte. But it also means fantastic weather for going outside and getting active!

As the days get shorter and start to cool down, it’s important to take advantage of the outdoors. Time outside is linked to a decrease in stress, depression, and anxiety in studies across the board. Not only will your mood improve, but you will get exposure to vitamin D and some fresh air. The list of benefits really grows when you think of all aspects of an outdoor sweat session.

“Because you are outdoors, you deal with factors such as wind resistance and terrain changes,” says Ginnie Emmott, ACSM EP-C, fitness specialist and supervisor at the Folsom Fitness and Rehabilitation Center at Methodist Dallas Medical Center. “This can make a workout more difficult than an indoor routine. You also typically have fewer distractions, like a TV or magazine, than indoors and reap the mental benefits of taking a break to recharge.”

Whether you are planning a day with the family, need a great date idea, or are just craving some time in nature, there are several activities that you can choose from.

**Hit the trails**

North Texas may not have mountains to climb, but there are a great number of hiking trails with views that are worth the trek. Pack a picnic and make a day out of it! Cedar Ridge Nature Preserve, settled on the east side of Joe Pool Lake 20 minutes outside of downtown Dallas, features 9 miles of trails that range from easy to difficult. Another option is Arbor Hills Nature Preserve in Plano, where you have the choice of a paved recreational trail or natural unpaved trails. Both are around 3 miles.

**Wheels up**

The trails of Dallas aren’t just for walking. If you have sensitive joints, cycling is a great option to get your heart rate going. If you have a bike sitting in the garage, take it to get serviced at one of the many bike shops around town. A typical tune-up will check your tires, brakes, and chains.

If you don’t own a bike, there are currently many bike-sharing programs. Companies like LimeBike (limebike.com) and Vbikes (vbikes.com) have brought dockless bikes to the city, which you can locate on their apps.

» **GRAB A HELMET AND GO**

Get riding now so you’re ready for the Dallas Bike Ride on Nov. 3. Learn more on page 4 or at dallasbikeride.com.
Yoga in the park
Normally, we flock to studios or set up shop in our living rooms to practice yoga. But since September is National Yoga Awareness Month, why not try this activity out in the fresh air? Klyde Warren Park hosts Yoga in the Park with the Dallas Yoga Center every Saturday morning at 10 a.m. Get there a little early to scope out a good spot, and be sure to bring your own mat.

A-maze-ing races
A quintessential fall activity is running through a corn maze. Dallas-Fort Worth has wonderful options that are all family-friendly and open starting in late September or early October. Check out these popular locations:
- Flower Mound Pumpkin Patch — Flower Mound flowermoundpumpkinpatch.com
- Hall’s Pumpkin Farm — Grapevine hallspumpkinfarm.net
- Storybook’s Pumpkin Patch — McKinney storybookranch.org

Turkey trots
A turkey trot — or Thanksgiving Day race — is a great tradition to start. You don’t have to be a runner to enjoy these events. Most have several races of different lengths (5K being the most popular) and welcome dogs and strollers. The guilt of that pecan pie goes away when you remember that you started the morning with a good workout. Here are some local trots to consider:
- Dallas YMCA Turkey Trot, thetrot.org
- North Texas Turkey Trot, northtexasturkeytrot.com
- Fort Worth YMCA Turkey Trot, fwtrot.org

Get sporty
All you need is a ball and some space to run. Whether it’s throwing a football, kicking a soccer ball, or shooting some hoops, pickup sports are fun for you, your friends, or the kids!

If you want to make it more official, check out a local sports league. For example, Dallas Sport and Social Club facilitates several different sports throughout the year all over the city (dallassocialclub.com).

Cedar Ridge Nature Preserve is a great place in North Texas to go for a hike and enjoy autumn’s cooler temps.

» MAY THE COURSE BE WITH YOU! Do you want to burn off a few calories before Thanksgiving? Join us for Gobble Hobble — a fun run, 10K, and 5K race benefiting the Boys and Girls Club of Richardson. Learn more and register at gobblehobble.com.

» SOME DAYS THE WEATHER DOESN’T LET YOU GET OUTDOORS, but you can work on your wellness at one of Methodist Health System’s fitness centers. Find one at MethodistHealthSystem.org/Fitness.
There’s a DIET for that
LEARN HOW TO EAT FOR THESE FOUR COMMON HEALTH CONCERNS

WHAT WE EAT MATTERS.
The right diet can change the way you look and feel, reduce risk factors for disease, and help you manage chronic conditions. Whether you’re eating to lose weight, control diabetes, or reduce cardiovascular risk, a registered dietitian can work with you to create a personalized nutrition plan.

SEPTEMBER IS FRUITS AND VEGGIES — MORE MATTERS MONTH, and it’s worthwhile to note that whole fruits and vegetables are recommended for almost all the health conditions listed here.

- Unground whole grains. Brown rice, whole oats, and other nonflour whole grains contain fewer calories per pound than ground whole grains, and they leave you feeling full longer.
- Leafy greens and cruciferous vegetables. Their high-fiber content helps you feel full without gaining weight.
- Lean proteins. Lean meats, seafood, beans, eggs, nuts, seeds, and low-fat dairy products are all excellent for keeping hunger in check while limiting saturated fat.
- Red or purple fruits. These fruits, like ruby red grapefruit, tart cherries, and berries, are richest in flavonoids called anthocyanins, which may help to prevent weight gain.

We asked Kristen Wilck, RDN, LDN, director of clinical nutrition at Methodist Dallas Medical Center’s Weight Management Program, to share her recommendations for adapting diets to your health goals.

1. MAINTAIN A HEALTHY WEIGHT

Weight control is a common struggle. Most people know that more calories lead to weight gain and that fewer calories lead to weight loss — however, all calories are not created equal. Foods that are high in nutritional value and provide a feeling of satiety are more beneficial for weight loss than foods that have the same number of calories but provide few nutrients and still leave you feeling hungry.

- Unground whole grains. Brown rice, whole oats, and other nonflour whole grains contain fewer calories per pound than ground whole grains, and they leave you feeling full longer.
- Leafy greens and cruciferous vegetables. Their high-fiber content helps you feel full without gaining weight.
- Lean proteins. Lean meats, seafood, beans, eggs, nuts, seeds, and low-fat dairy products are all excellent for keeping hunger in check while limiting saturated fat.
- Red or purple fruits. These fruits, like ruby red grapefruit, tart cherries, and berries, are richest in flavonoids called anthocyanins, which may help to prevent weight gain.
2. PREVENT AND CONTROL DIABETES

Diabetes affects the body’s ability to make and use insulin, which regulates blood sugar levels. Therefore, people with diabetes must closely monitor blood sugar levels. If levels are not well-managed, people are at risk for serious health complications, including vision loss, heart disease, stroke, kidney failure, and premature death. Fortunately, changing your diet can regulate blood sugar, reduce risks, and even prevent prediabetes from becoming diabetes.

**Foods to Eat**

- **Whole grains.** They contain fiber, which slows digestion and lowers the body’s glycemic response.
- **Fruit.** Although they contain sugars and carbohydrates, most fruits have a low glycemic index due to their fiber content.
- **Nuts.** Minimally processed plant foods, like nuts, berries, seeds, and legumes, reduce the risk for diabetes, as well as heart disease and stroke.
- **Leafy green vegetables.** Lettuces, kale, and spinach are associated with a significantly reduced risk of type 2 diabetes.
- **Monounsaturated fats.** Found in avocados, olive oil, and nuts, these healthy fats may help to prevent type 2 diabetes.
- **Full-fat dairy products.** These may have protective effects against diabetes.
- **Moderate coffee and tea.** Both beverages decrease diabetes risk. Good news for those who enjoy a morning cup!

**Foods to Limit:**

- **Sugar-sweetened beverages.** These raise blood sugar and have been proven to increase weight, a major risk factor.
- **Red meat and processed meat.** Among several health concerns, sodium and nitrites in processed meats and heme iron in red meat can lead to insulin resistance.
- **Salt.** People with diabetes often have high blood pressure, and salt raises it further.
- **Refined grains.** These cause blood glucose and insulin responses similar to sugar.

**SIMPLE LIFESTYLE TIPS:**

- Eat small portions throughout the day instead of large meals. This diet pattern can prevent your blood sugar from rising and dropping suddenly.
- Focus on losing weight and increasing activity.

“Nutrition information changes often, so it’s important to make sure any dietary guidelines you follow come from a reliable source. Registered dietitians use guidelines that are researched, evidenced-based, and tailored to your specific needs – not just the ‘diet of the day.'”

— Kristen Wilck, RDN, LDN, director of clinical nutrition, Weight Management Program

continued on the next page >>
The most common cause of cardiovascular disease is atherosclerosis, a buildup of plaque in artery walls that inhibits blood flow to the heart and other organs and raises blood pressure. It can be caused by an unhealthy diet high in cholesterol, saturated fats, and trans fats. Adjusting your diet can lower blood pressure and cholesterol and greatly reduce your risk of developing heart disease.

**FOODS TO AVOID:**
- **Salt.** It raises blood pressure.
- **Processed meats.** Foods like hot dogs and bacon are high in sodium and can promote clogged arteries.
- **Saturated and trans fats.** These raise your LDL (or “bad”) cholesterol and lower your HDL (or “good”) cholesterol.

**SIMPLE LIFESTYLE TIPS:**
- Bake, broil, roast, stew, or stir-fry meat and drain the fat.
- Replace higher-fat dairy products with lower-fat options.
- Replace shortening with liquid vegetable oils and soft margarine.
- Prepare food at home to control salt and season with spices instead.

**OVERALL TIPS:**
- **Eat small, frequent meals** instead of large ones to avoid overwhelming the digestive system.
- **Keep a food diary** to help identify problem foods.
- **Drink plenty of fluids** to prevent constipation.

**CONTROLLING IBS:**
- **Eat the right kind of fiber.** Soluble fiber, found in foods like oranges, strawberries, cucumbers, and carrots, slows digestion and can prevent diarrhea. Insoluble fiber, found in broccoli, leafy greens, zucchini, and whole grains, can help with constipation.
- **Limit alcohol and caffeine.** They stimulate the intestines and can cause diarrhea.
- **Limit artificial sweeteners with sugar alcohols.** Sorbitol, mannitol, and xylitol can cause diarrhea.
- **Limit carbonated drinks.** These can cause gas.
- **Avoid high-fat foods and dairy products.** They cause digestive issues in some people with the disease.

**MANAGING CROHN’S AND COLITIS:**
- **Choose a nutrient-rich diet.** Select foods with adequate calories, protein, and healthy fats. Nutrient deficiency is common among Crohn’s disease and colitis patients because the conditions interfere with nutrient absorption.
- **Supplement nutrients.** Check with your doctor to see if taking vitamins or other supplements is right for you.
- **Avoid high-fiber foods.** Raw fruits and vegetables can cause gas, diarrhea, or abdominal pain.

FIND HELP FOR DESIGNING YOUR DIET

Find a registered dietitian to help you manage your health condition through the Weight Management Program at Methodist Dallas. Call **214-947-0004** or email **weightloss@mhd.com** to learn more.
More than 2.5 million Americans are enjoying greater mobility and quality of life thanks to total hip replacement, one of the most common surgeries performed in the U.S.

But this potentially life-changing procedure hasn’t been an option for hip patients confined to wheelchairs or beds because of extensive pelvic bone loss or damage — that is, until the use of advanced 3D imaging and computer-aided design and manufacturing technology in orthopedic surgery.

“Patients with massive bone defects due to traumatic injury, infection, or complications from previous joint surgeries do not have the anatomical structure necessary to attach standard prosthesis components,” says orthopedic surgeon David Heck, MD, on the medical staff at Methodist Dallas Medical Center, who is using 3D imaging technology to help his patients with severely damaged hips.

**How it works**
Based on a patient’s 3D computed tomography scan, imaging technology is used to fabricate a model of the patient’s damaged pelvic structure using 3D printing. The realistic 3D model enables the surgeon to work with prosthetic device manufacturers and engineers to design customized ball-and-socket components for the new hip joint. The 3D model assures a good design and fit before the pieces are manufactured.

Compared to typical joint replacements where standard prosthetic devices are readily available and usable, the use of 3D imaging technologies now makes hip replacement an option for extreme cases of bone loss or damage. Though the process from 3D image to model and component fabrication can take several weeks to several months before everything is planned and ready for the patient’s hip replacement, the wait is well worth it.

The benefit of this innovative technology is that it can return otherwise wheelchair- or bed-bound patients to a quality of life that wasn’t possible before. After hip replacement, these patients often are able to stand, walk, take care of themselves, resume daily activities, and even return to work.

**Orthopedic excellence at Methodist Dallas**
Methodist Dallas is a leader in orthopedic care. It was one of the first in the country to offer the minimally invasive anterior approach to hip replacement. Since that first procedure in 2007, more than 1,000 anterior-approach hip replacements have been performed here. It is still one of the few hospitals in North Texas to offer this advanced procedure.
Elaine McCray thought she’d be living with pain for the rest of her life. She’d had GERD (short for gastroesophageal reflux disease) for 15 years. It had caused burning and stabbing pains in her chest, difficulty swallowing, hoarseness, and a gurgling in her throat.

“After all these years of taking all of these different medications and changing my eating habits, nothing got better,” she says.

The pain was so intense at times that it landed her in the emergency department. “One time I was supposed to get on a plane but didn’t because I was balled up on the floorboard of my husband’s truck on the way to the airport,” she remembers. “He said, ‘There’s no way I can let you get on a plane like this.’”

Unfortunately, Elaine’s condition wasn’t properly diagnosed and treated by doctors in Nebraska, where she lived at the time. They gave Elaine a range of medications that weren’t ideal for long-term use and came with many different side effects.

A new home and a new hope
It wasn’t until Elaine moved to Mansfield that she found relief. Two doctors on the medical staff at Methodist Mansfield Medical Center, gastroenterologist Muhammad Memon, MD, and general surgeon Jeremy Parcells, MD, found the root cause of her GERD: a hiatal hernia. It’s a condition in which the top part of the stomach slides upward through an opening in the diaphragm, which then allows stomach acid to come into the esophagus.

First, the Methodist Mansfield surgical team fixed the hiatal hernia endoscopically using the robotic da Vinci® Surgical System. They then performed transoral incisionless fundoplication, or TIF. In this procedure, doctors reinforce the barrier between the esophagus and stomach using tissue from the upper part of the stomach, doubling it over, and then suturing it into place. This prevents acid from bubbling up into the esophagus and causing problems.

“A significant portion of the population has reflux and hiatal hernias,” Dr. Parcells says. “Medications are usually used to treat the symptoms of the condition, but they can mask a structural problem.

“Patients have great results from these anti-reflux procedures and hiatal hernia corrections, plus people don’t want to be on maintenance medication for 30 or 40 years,” he explains. “Some of my patients’ biggest regret is that they didn’t have the surgery sooner.”

Finally free to live
Now, Elaine is symptom-free, off medications, and able to eat all the foods she had given up.

“My husband and I love to cook, have a glass of wine, and entertain friends, and I can do all of that again,” she says. “Moving to Texas and Methodist Mansfield were godsend for me. I remember thinking, ‘Where have you been all my life?’”

» WHAT ELSE CAN DA VINCI DO?

Learn more about the robotic procedures available at Methodist Mansfield at MethodistHealthSystem.org/Mansfield-Robotics.
Clifton and Elaine McCray enjoy hosting get-togethers with family and friends now that Elaine's GERD symptoms aren't in the way. Watch her share her story at MethodistHealthSystem.org/Media.

The da Vinci® robot makes for BETTER SURGERIES

Patients may experience quicker recoveries, less discomfort, and a reduced need for pain medications after surgery when doctors use the da Vinci® Surgical System. That’s because surgeons are able to make smaller incisions and have greater maneuverability with the robot.

There are benefits for doctors as well. “The visualization, or clarity of the picture, is superior to anything out there, plus it’s 3D,” says Jeremy Parcells, MD, on the medical staff at Methodist Mansfield Medical Center, who performed Elaine McCray’s hiatal hernia repair.

“The robot is so clean and efficient to work with compared to traditional laparoscopy,” he says. “We still do a lot of traditional laparoscopy, but this really improves dexterity and what you can visualize.”

Elaine’s hiatal hernia was fixed using the da Vinci robot, but its applications aren’t limited to gastrointestinal procedures. It’s also used for surgery involving the lungs, gallbladder, liver, kidneys, uterus, colon, and other types of hernias — nearly any place that’s hard to reach.

» AT A HOSPITAL NEAR YOU

The da Vinci Surgical System is available at all four main Methodist Health System hospitals. To find a surgeon performing these procedures, visit MethodistHealthSystem.org/FindADoctor.
Hunting, fishing, wakeboarding, traveling — James Wyner loves doing it all. The self-professed “outdoors guy” makes the most of the Texas sunshine, spending time with friends and his three daughters.

But something was distracting him from doing the things that he loves with the people he loves: an inguinal hernia.

Twenty years ago, when James was in middle school, he was diagnosed with the hernia in his right groin. Told it was nothing to worry about as long as it wasn’t hurting, James moved forward through life, waiting and watching for the hernia to give him trouble.

“I didn’t really take time off; meaning it didn’t get in the way of my active lifestyle,” he says. “If my buddies wanted to play golf, I played golf. If my daughters wanted to play tag, I played tag. Nothing bothered me whatsoever.”

The right timing
In 2015, James decided to finally look into having the hernia repaired. He was referred to Kevin Niblett, MD, FACS, general surgeon on the medical staff at Methodist Charlton Medical Center, but James chose to put off the surgery.

“I explained that as young as he was, if he continued in a lifting job [at the time, James was a diesel mechanic on an oil rig] or even with normal everyday
activities, like moving the couch to sweep behind it or lifting one of his three kids, the hernia would eventually get worse," Dr. Niblett says.

He was right.

Fast forward to 2018: James had a new job as project manager for a concrete company — far less physically intensive — and the hernia was finally starting to trouble him.

“I told my doctor, 'I want to get this fixed. It’s not uncomfortable, but it’s weighing on me,’” James recalls.

“I wanted the best-of-the-best care, and she sent me to Methodist Charlton and Dr. Niblett.”

Now seeing Dr. Niblett for the second time this past March, James was confident and ready to move forward with surgery, especially considering Dr. Niblett found a second hernia above James’ navel.

Nothing holding him back
James’ surgery was scheduled for Thursday, March 22, with the robotic da Vinci® Surgical System.

There are several advantages to doing the procedure robotically. Traditional open inguinal repairs require a 3- to 4-inch incision, which means more groin pain. The da Vinci approach requires much smaller incisions, 12 millimeters or less.

“I wanted to do the surgery robotically because it’s safer, it’s cleaner, and your recovery time is a lot less,” James says. “I have three incisions that are maybe as wide as a pinky nail. My soreness was minimal — maybe a 2 on a scale of 1 to 10.”

During the procedure, Dr. Niblett found a third hernia on the other side of James’ groin. While the surgery is usually less than an hour, James’ was four hours — but he still was able to go home that day. By Tuesday he was back to work.

“I think after it was all said and done, James realized that if he knew it would be this easy, he would have done it earlier,” Dr. Niblett says.

And considering how great he feels now, James would agree.

“The whole experience with Dr. Niblett, da Vinci, and Methodist Charlton was perfect — just phenomenal,” James says. “It sounds a little cheesy, but I feel like I have a piece of me back. I can go do what I want with nothing holding me back anymore.”

» READY FOR RELIEF?

The da Vinci Surgical System can be used to repair inguinal, umbilical, ventral, and hiatal hernias and so much more. If you’ve been putting off a life-changing procedure, consider consulting with one of the surgeons at Methodist Health System. Go to MethodistHealthSystem.org/FindADoctor.
Major surgeries with minor incisions.

No one wants to have surgery. It's why Methodist Health System offers minimally invasive surgery from highly skilled surgeons using the robotic da Vinci® Surgical System. Patients can benefit from less pain, smaller scars, shorter hospital stays, and faster recovery times, getting them back to life sooner.

Used for a variety of major and minor surgeries, the robot creates a natural extension of the surgeon's eyes and hands, which can allow for much smaller incisions and less risk. If you have to have surgery, see if it can be performed as a minimally invasive procedure. Trust. Methodist.

To find a physician, call 214-444-7303.
All Access
From virtual visits to urgent care clinics, Methodist Health System has you covered

Illness and injury typically don’t strike when it’s convenient, so Methodist Health System has a variety of ways to access healthcare when and where you need it.

**Virtual visits through MethodistNOW**
Roxana Cham, MD, family medicine physician at Methodist Family Health Center – Firewheel, says MethodistNOW, a virtual visit service, is ideal for patients with busy schedules who need treatment for colds, flu, sinus and bladder infections, pinkeye, and skin rashes. All you need is a smartphone or computer for a $40 virtual appointment.

To use MethodistNOW, complete an online health questionnaire at [MethodistNOW.Life](http://MethodistNOW.Life). A board-certified family or internal medicine physician will review your responses and then create a treatment plan, which you’ll receive via email.

**Methodist Family Health Centers and Medical Groups**
If a MethodistNOW physician thinks a patient requires further evaluation, the patient may be referred for a face-to-face appointment with a primary care provider (PCP) at a Methodist Family Health Centers and Medical Groups location. In such cases, patients won’t be charged for the virtual visit.

“These health centers are also ideal for nonurgent appointments for aches and pains, allergies, and other illnesses,” Dr. Cham says. “They provide back-to-school physicals, regular well visits, and preventive services as well.”

Getting an appointment with a PCP is easy, thanks to the more than two dozen locations throughout Dallas and the surrounding areas. Look up one near you at [MethodistHealthSystem.org/Primary-Care](http://MethodistHealthSystem.org/Primary-Care).

**Methodist Urgent Care centers**
When you have an illness or minor injury but want to avoid the wait time associated with a visit to the emergency department (ED), urgent care is a viable option. Joseph M. Kim, MD, is medical director for Methodist Urgent Care, which has three facilities — Dallas (at Inwood Village), Grand Prairie, and Mansfield — that accept walk-in patients. ([Find details at MethodistHealthSystem.org/Urgent-Care](http://MethodistHealthSystem.org/Urgent-Care).)

“Urgent care is a good choice for people who need medical attention after hours or during the day but can’t get in to see their PCP,” he says. “Patients typically wait only 20 minutes to be seen, and it’s less expensive than an ED visit.”

**Hospital emergency departments**
While urgent care is appropriate for treating minor traumas, skin infections, flu, abdominal pain, and some illnesses, Dr. Kim cautions that it isn’t a substitute for an ED. Labored breathing, seizures, drug overdose, and other severe conditions require emergency attention.

Methodist Health System has five emergency departments available to serve patients: Methodist Charlton, Methodist Dallas (Level I Trauma Center), Methodist Mansfield, and Methodist Richardson Medical Centers, as well as Methodist Richardson – Campus for Continuing Care. Learn more about our emergency care at [MethodistHealthSystem.org/Emergency](http://MethodistHealthSystem.org/Emergency).
Dallas-Fort Worth has become quite the destination for families, young professionals, and businesses. Known for its low cost of living, numerous job opportunities, and mild weather, it has been named by Forbes magazine as the third-fastest-growing metropolitan area in the nation for 2018.

So what did Methodist Health System do? We chose to grow right along with our communities. “When deciding where and how to grow as a healthcare provider, we had two goals in mind,” says Nkem Okafor, FACHE, vice president of strategy and planning for Methodist. “First, we wanted to strengthen our presence in communities where we already were. Second, we wanted to find ways to fill healthcare gaps in communities where we hadn’t yet planted our flag.

“We asked, ‘What else can we do to make care more convenient for people in these communities?’ And it’s a question we continue to ask. We’re not done finding more ways to grow and serve.” In 2018, we have been planning and building facilities at several new locations, and some have already opened to serve you and your family. HERE’S A LOOK:

### Professional Office Building II at Methodist Mansfield
This new professional office building (POB), located at the corner of Hospital Drive and Matlock Road on the Methodist Mansfield Medical Center campus, will be home to physicians offering primary and specialty care and will house additional hospital services.

Now that construction on the 82,000-square-foot, four-story facility is complete, medical practices have started to finish out their offices.

### New hospital in Midlothian
This full-service hospital, to be located just east of the Midlothian ISD Multi-Purpose Stadium, will help make care more accessible to this booming community. Features are expected to include:
- 40 individual patient rooms, with space to add 40 more
- 12 emergency beds
- Two operating rooms, with room to add two more
- Women’s services — labor and delivery
- 40,000-square-foot POB for physician practices.

### Methodist Convenient Care Campus
At the end of May, Methodist Convenient Care Campus opened at 4560 Lake Ridge Parkway in Grand Prairie. This site comprises Methodist Urgent Care; the new location for the Methodist Family Health Center – South Grand Prairie; and several specialty services, including cardiology, general and colorectal surgery, neurosurgery, orthopedics, and pulmonology.
$85 million expansion at Methodist Richardson

Methodist Richardson Medical Center, located at 2831 E. President George Bush Highway in Richardson, has proven so valuable that it’s expanding years ahead of schedule. The hospital has added a ninth operating room with a second da Vinci® Surgical System for robot-assisted procedures, and it has broken ground on a seven-story parking garage with 761 parking spots, set to be completed this fall. Construction has also begun to add a fifth and sixth floor to the hospital, which will add 150 more patient rooms.

Methodist Premier Wellness

This year, Methodist made a foray into concierge medicine with the establishment of Methodist Premier Wellness. Located at 4101 Lomo Alto Drive in Dallas, this practice model combines world-class healthcare with unparalleled service. Available 24/7, the concierge physician:

• Creates a customized annual wellness plan
• Performs annual checkups, immunizations, blood work analysis, and screenings
• Handles prescription medicines and vaccinations needed for travel
• Provides certain cosmetic services (for an additional fee).

Robert S. Folsom Wellness Center

Expected to open in fall 2019, the Robert S. Folsom Wellness Center will be dedicated to maintaining and improving health for southern Dallas community members. The two-story, 31,000-square-foot facility is expected to include advanced fitness equipment, a lap/exercise pool, a whirlpool, two dry saunas, two group exercise studios, a cycling studio, an indoor walking track, a demonstration and participation kitchen, and a 2,100-square-foot conference and community room.

Turn the page for more
When it comes to self-management of healthcare, there’s one challenge that just about all patients have in common: how to best keep up with medical appointments and medical records.

One tool that can help patients stay on top of things is MyChart, now available through Methodist Health System. This secure online portal provides quick access to:
- Upcoming appointments
- Laboratory and test results
- Medical imaging records
- Prescription information
- Diagnoses and treatment plans
- Provider contact information.

Megha Gavin, a dance instructor in Arlington, says that MyChart helped her stay organized while she was going through treatment for breast cancer earlier this year.

“In addition to surgery, I went through multiple rounds of chemotherapy and radiation, plus I am also treated regularly for a connective tissue disorder,” Megha says. “All of that adds up to quite a bit of information to track, something that became especially difficult when I began to experience short-term memory loss as a side effect of treatment.”

When she needs to remind herself of an upcoming appointment or print out records, Megha says she simply logs in to MyChart on her computer to get the information in a matter of minutes. “It’s very helpful to be able to access my records as soon as they are uploaded,” she says.

How MyChart works
To get started with MyChart, patients can go to MyChart.MethodistHealthSystem.org and set up a password-protected account using an activation code provided by their physicians. (Patients can also request an activation code through the MyChart site.)

Once an account is established, patients can use a computer or mobile device to find out when their next appointment is scheduled, view or download records, and contact their provider’s office directly through the portal.

“Methodist decided to implement MyChart because we believed that improved transparency and communication between providers and patients lead to better patient outcomes,” says Darin Charles, MD, associate chief medical information officer for Methodist.

“In addition to 24-hour access to everything from after-visit summaries to immunization records, patients can reach out to a clinic with refill requests, medical questions, and requests for appointments.” For Megha, having on-demand access to her medical information puts her in the driver’s seat in managing her own healthcare. “It’s important to be your own healthcare advocate, and it’s hard to advocate when you don’t have enough information,” she says. “Knowledge is power.”
Get fast, convenient healthcare at home, at the office or on the go.

Now you can access Methodist family healthcare anywhere!

Go to MethodistNow.Life
Nicole and Ben Reynolds of Burleson say their son just couldn’t wait to party. Due mid-May 2017, Jaxon arrived instead on Fat Tuesday, Feb. 28 — weighing just 2 pounds, 10 ounces, with his umbilical cord wrapped around his neck.

After 58 days in the Level III Neonatal Intensive Care Unit (NICU) at Methodist Mansfield Medical Center, Jaxon went home weighing 5 pounds, 9 ounces, and he has been a healthy, growing baby ever since.

While in the NICU, Jaxon received 24/7 care from a multidisciplinary team, including Benjamin Brann, MD, neonatologist on the hospital medical staff. “A Level III NICU has the technology and staff to resuscitate and stabilize fragile babies as early as 23 weeks and manage their complex issues,” Dr. Brann explains.

One obstacle after another
Nicole chose Methodist Mansfield for her delivery based on recommendations from family and friends and was confident in the quality of care the hospital could provide. The NICU was an important consideration, as well.

Because of a prior surgery, she was planning on a cesarean section delivery — just not at 29 weeks.

In late February, she began experiencing a fluid discharge. When it turned to spotting, she headed for the hospital.

In Methodist Mansfield’s obstetrics emergency department (OB/ED), a test confirmed that Nicole was leaking amniotic fluid. After a steroid shot to help mature Jaxon’s lungs and two sonograms, Nicole was prepped for surgery surrounded by two medical teams: one for her and one for Jaxon. They included an in-house OB hospitalist, a perinatologist, a nurse practitioner, neonatal and labor and delivery nurses, and a respiratory therapist.

Born with his umbilical cord around his neck, Jaxon had to be resuscitated and given an emergency blood transfusion in the operating room. He then remained on assisted ventilation until his lungs developed. Then at 32 weeks, he developed a serious intestinal disease common among preemies and required a second blood transfusion.

Throughout all these obstacles, the NICU team rejoiced with the Reynoldses at every milestone and encouraged them through Jaxon’s setbacks.

“One of the things that defines a good unit is parent involvement in the nursery,” Dr. Brann says. “Methodist Mansfield is very parent-friendly. We go out of our way to keep parents up to date as their child is recovering and maturing.”

Celebrating Level III NICU care
Nicole is grateful for the care she and Jaxon received from the OB/ED and NICU teams at Methodist Mansfield, and she still stays in touch with the nurses who were such a big part of their lives for Jaxon’s two months in the NICU.

On Jaxon’s first birthday, she made a surprise visit to the NICU, bringing cupcakes to the staff to celebrate her sweet, active boy.

“They were wonderful to me,” Nicole says. “They’re like family.”

» WOMEN’S SERVICES IN MANSFIELD

Learn more about the high-quality, comprehensive healthcare for women and children provided under one roof at the Women’s Center at Methodist Mansfield. Visit MethodistHealthSystem.org/Mansfield-Women.
Nicole Reynolds is grateful for the 24/7 care her son, Jaxon, received while in the NICU at Methodist Mansfield.
A Very Special

Methodist Richardson delivers its first set of quadruplets — and a dream come true for the Mugerwa family
Delivery

Blindly beautiful smiles greet you when you meet Victoria and Robert Mugerwa. There is a warmth and gentleness flowing from them — and between them. It’s the kind of affection that comes from 18 years of devotion, love, and perseverance — and the Mugerwas have persevered through much.

The couple always dreamed of building a family together. Sadly, their journey had been a disappointing one, fraught with failed fertility treatments and several miscarriages.

That is, until Jan. 9, 2018 — the day Victoria delivered a gorgeous baby girl and three handsome boys at Methodist Richardson Medical Center, the hospital’s first set of quadruplets.

“I’m 45 years old,” Victoria says. “Everyone told me I couldn’t have a baby, but here I am with four babies!”

A long journey
“We tried for a baby from the get-go, but nothing worked,” Victoria says. “When I did conceive, I’d find out I was pregnant, and then the next morning I’d start bleeding.” By 2015, with Victoria now in her early 40s, she and Robert accepted that parenthood would only come through adoption. It was far less expensive to adopt in their native country of Uganda, so in December 2016, the couple traveled abroad in search of their dream. But while there, they decided to give in vitro fertilization (IVF) one last try. A few weeks later, Robert flew back to the states, and Victoria moved forward with the rest of the IVF process in Uganda.

Sadly, the first two transfers failed. But Victoria insisted on trying the third transfer with all four remaining embryos, two of which the embryologist believed wouldn’t make it.

“You can’t just throw them away!” Victoria said to the specialist. “Those are my babies.”

Two weeks later, a blood test revealed that Victoria had conceived. Two weeks after that, four little heartbeats on a sonogram confirmed that she was right: All four of those babies were hers.

Holding out for hope
As the weeks passed and Robert devoured the photos Victoria sent him of her growing stomach, he guarded his heart. “It was an anxious time for me, but at the same time exciting that we had gotten this far,” he says. “We are prayerful people, so we just kept praying to God and Jesus through Saint Rita, patron saint of impossible cases.”

As her pregnancy progressed, Victoria realized it would be safer for her to deliver in the U.S. She flew back and joined Robert in Texas. Her sister, who lived here, referred her to her own OB-GYN, Jan Risden, MD, FACOG, on the Methodist Richardson medical staff.

Victoria expected Dr. Risden to be shocked upon hearing she was expecting quadruplets; instead, there was calm and reassurance.

“You know how you tell your mother something and feel like she can take care of everything? That’s how Dr. Risden is,” Victoria says. “She had this look like, ‘I do four babies all the time!’”

The truth is, this was Dr. Risden’s first set of quadruplets, but she knew that the right team was in place at Methodist Richardson to help Victoria through delivery and take care of her infants.

“I handle every pregnancy exactly the same way: You have to do right by those babies,” Dr. Risden says. “I give the same amount of care if it’s one baby or four, if it’s a first pregnancy or if that woman has miscarried 13 times and is finally successful.”

“Methodist Richardson is a good place to deliver because of our Level III Neonatal Intensive Care Unit [NICU],” she explains. “That staff delivers impeccable care with genuine love.”

Because of Victoria’s age and high blood pressure, Dr. Risden and a maternal-fetal specialist were conscientious of both mom and the babies. The pregnancy went smoothly, however, and while Victoria and Robert prepared to welcome home four little ones, the medical team at Methodist Richardson got to work.

A team effort
Just shy of her 29th week, Victoria began having contractions, and Methodist Richardson put its action plan into place.

“We had been preparing for weeks,” Dr. Risden says. “We wanted to make sure we had a controlled environment to deliver the infants. We had a surgical tech, two additional OB-GYN surgeons, an anesthesiologist, and others in the operating room. The NICU team also needed major preparation.”

That’s where neonatologist Lilian St. John, MD, came in.

“We had a neonatologist, respiratory therapist, and NICU nurse for each baby,” says the neonatologist on the Methodist Richardson medical staff. “It was a very well-coordinated event with everybody stepping up to do what was best for the patients.”

The planning paid off, and there were no complications with the delivery. “All of the babies came out crying and annoyed,” Dr. Risden says, which was continued on the next page >>
exactly what Victoria wanted.

“I had prayed that I would hear my babies cry,” Victoria says. “That’s how I would know they were okay.”

Roselyn came first. Raymond followed. Then Ryan and Raphael. As one of the nurses remarked to Victoria, “Your sons are gentlemen — they let the lady go first.”

After making sure Victoria was safely out of the operating room, Robert made his way to the NICU. He moved from baby to baby, marveling at his newborn children, each weighing only about 2 pounds. “I was amazed at the number of people taking care of each baby,” he says. “We can never be thankful enough to the team. This health system is excellent.”

The journey home
For the next six weeks, Dr. St. John and the NICU team took care of the Mugerwa quadruplets. “They did marvelously,” she says. “Raymond did require a blood transfusion, but other than that, their course in the NICU was uneventful, which is a wonderful thing.”

The Mugerwas came to the NICU every single day to see their babies. The only break in that pattern was for Victoria, who spent a few days in the hospital with high blood pressure. Through it all, the couple depended on the NICU team.

“They’re such a dedicated team,” Robert says. “They took the time to talk to us as parents and answered all our questions. We are thankful for how they prepared us.

“By the time the babies came home, we were pros,” he adds, laughing.

That homecoming started on March 8 when Ryan and Raphael came home; then three days later their brother and sister joined them. The Mugerwas’ dream of having a family of their own finally fell into place.

“Maybe the best decision I made in all of this was coming back to the United States, to be with Robert and deliver our babies at Methodist Richardson,” Victoria says. “We wouldn’t be here without the Methodist Richardson medical team. There is so much they did that we couldn’t do, and we will always be grateful.”

“MAYBE THE BEST DECISION I MADE IN ALL OF THIS WAS COMING BACK TO THE UNITED STATES, TO BE WITH ROBERT AND DELIVER OUR BABIES AT METHODIST RICHARDSON.”

— VICTORIA MUGERWA

From left to right: Raphael is known for his gentleness, Ryan for his stubbornness, and Raymond for being a mama’s boy. Roselyn, mom says, is “a lady in herself.”

HAVING A BABY?
Let an OB-GYN at Methodist Richardson help. Find one on our medical staff at MethodistHealthSystem.org/FindADoctor.
A sepsis infection left Lauren Michelsen, DO, with chronic kidney failure. Today she’s writing a book about her survival story.

Chosen

HOW A DIRECTED ORGAN DONATION FREED DR. LAUREN MICHELSSEN TO LIVE AN ACTIVE LIFE »
It’s incredibly rare for a healthy 52-year-old to experience flu-like symptoms and end up in full-blown septic shock 12 hours later. Yet that’s exactly what happened to Frisco-based OB-GYN Lauren Michelsen, DO, on New Year’s Eve 2015.

“Every year we go on a family ski trip,” Dr. Michelsen explains. “Five days into the trip, I began feeling like I was coming down with the flu as we got ready to leave for New Year’s dinner. After vomiting all night, I told my husband I wanted to go to the hospital for IV hydration and medicine to stop the vomiting.”

By the time she arrived at a nearby hospital, Dr. Michelsen was hypothermic and her skin had started to turn purple and was mottled from the chest down. The triage nurse immediately recognized that she fit the criteria for septic shock and activated the shock team.

“At this point, my condition was quickly becoming critical,” Dr. Michelsen says. “Multiple organs started to fail [lungs, heart, and kidney], my heart could no longer pump blood effectively through the body, and my skin had begun dying.”

Little did she know that surviving and healing from the septic shock would take a miraculous kidney transplant from a rekindled friendship.

**Before the shock**

Born and raised in California, Dr. Michelsen grew up wanting to be a physician. Both she and her husband, Steve, whom she met in medical school, had private practices in North Dallas. Life was busy and full as they worked and raised their two children, Josh and Carli.

Then one day in 2010, Dr. Michelsen let an ultrasound technician practice her technique on her abdomen. During the exam, the technician happened to find what appeared to be a tumor. An MRI scan confirmed Dr. Michelsen had multiple benign liver tumors and a large tumor on her spleen. She had surgery to remove the tumors and her spleen. This procedure was necessary but set the stage for her near-death from sepsis five years later.

“Your spleen plays multiple roles, but its main function is to filter your blood as part of your immune system,” Dr. Michelsen explains. “Without a spleen, certain bacteria go undetected and can run rampant through your body, which is what happened to me while on our ski trip.”

**Slim chances for survival**

Jump forward to New Year’s Day 2016, when a team of doctors was fighting to stabilize Dr. Michelsen. She had unknowingly contracted a strain of strep pneumococcal bacteria. Without the spleen to help clear her body of the disease, she became septic and her body began shutting down.

Doctors told her husband to bring their children to the hospital to say goodbye. Dr. Michelsen’s chances of surviving this rare, and almost always fatal, infection were low.

After 36 days in the intensive care unit, an air ambulance service brought her back to Texas for continued care and further surgeries. Dr. Michelsen would spend another 62 days in the hospital before finally coming home in April 2016.

**Sharing her story**

The entire next year was spent undergoing a complex and challenging rehabilitation, which included 12 surgeries,
daily physical therapy and wound care for the necrosis caused by the septic shock, and dialysis four days a week.

The magnitude of the sepsis infection left Dr. Michelsen with chronic kidney failure; meaning, she would need dialysis until she could undergo a kidney transplant. Her dialysis needs were complicated and required a special surgery, which led her to Richard Dickerman, MD, FACS, surgical director – kidney and pancreas transplant program at The Transplant Institute at Methodist Dallas. Expecting to be on dialysis for years before being matched with a donor, Dr. Michelsen was very open and public about her story, particularly on social media.

“A longtime friend posted that she was going to be traveling to Dallas in the summer of 2017, so I got in touch with her to make sure we could visit while she was here,” Dr. Michelsen says. “I told her all about my health issues, including my need for a kidney transplant.”

Six months later, her friend called and said she might have found a donor. Tragically, her friend’s 16-year-old nephew had suddenly ended up on life support, and during one of her last visits to the hospital, she happened to walk in as the organ procurement team was asking if the family knew anyone who needed his organs. That’s when she spoke up on behalf of her friend in Dallas.

**Directed organ donation**

Very few people are familiar with directed organ donation. Far more common is nondirected donations, where the donated organs go to someone based on their rank on a transplant waiting list. In instances where the family of the deceased knows of a person in need of a transplant, they have the option of directing the organs to the individual — known as a directed organ donation.

“There seems to be a much deeper connection for the family and patient when it’s a directed donation,” Dr. Dickerman says. “Lauren was so touched by the donation and has more than once told me how important it is that she live her life as best she can to honor the donor and his family.”

Dr. Michelsen affirms that she is lucky to be alive. “My donor’s family chose to donate everything they could, and I was just one of almost 10 people whose life was changed by organ donation,” she says. “I’ll be forever grateful.”
The trip of a lifetime was scheduled for Andre Cummings and his wife — it started with a family visit to New York, a stop back home, then a combined work trip and vacation the following month to Israel and Egypt. But appendicitis disrupted the couple’s itinerary.

The Cummingses turned to Methodist Charlton Medical Center to help get them back on track.

It wasn’t the fish
Andre and his wife, Melissa Valadez-Cummings, were in New York when sudden stomach pains struck. “We had fish for dinner,” Andre, 29, recalls. “When my stomach started hurting, we thought it was food poisoning.”

Andre and Melissa decided to wait until they were home to see their primary care provider in Cedar Hill for treatment. Once there, the doctor treated Andre for urinary tract and kidney infections; the symptoms for these infections can often mimic appendicitis.

Two days later, unbearable pain nearly immobilized Andre. Melissa took him to the emergency department at Methodist Charlton. “It was the best option,” Melissa says. “Our emergency was their emergency too.”

Small holes, big problem
A CT scan showed that Andre had a perforated appendix. “Perforation and rupture are really the same thing,” explains Richard Alexander, MD, general surgeon on the medical staff at Methodist Charlton. “Because of the perforations, or holes, in the appendix, the contents spill out into the abdomen. It can become a very serious condition if not treated quickly.”

Andre’s appendectomy was scheduled for first thing the next morning. Dr. Alexander was the surgeon on call and explained the procedure to Andre.

“It wasn’t until I learned that they were moving other surgeries so I could go first that I realized how serious it was,” Andre says. Concerns for their Middle East trip also surfaced, but the couple stayed hopeful.

Healing up
Dr. Alexander performed Andre’s appendectomy laparoscopically. This approach involves inserting small trocars, or ports, into the abdomen via tiny incisions. Through these ports, the surgeon maneuvers a camera and surgical tools, removing the appendix with precision and affording the patient several benefits.

“Laparoscopic surgery provides a faster recovery time, decreased pain, faster time to movement, and faster time to heal than open surgery,” Dr. Alexander says.

Andre also needed a drain in his abdomen to prevent postoperative infection. “A drain is fairly common with a perforated appendix,” Dr. Alexander explains. “All the bacteria and stool gathering in the appendix flow into the abdominal cavity. The drain helps to reduce the risk of an abscess forming by removing that fluid.”

The drain also meant an extended stay in the hospital to monitor Andre’s progress and address his pain. Melissa recalls, “The nurses cared for Andre and for me the way they care for all their patients — with respect, dignity, and most of all, love.”
On the road again
Andre went home a week after his surgery, but a follow-up CT scan revealed some gastrointestinal issues and an area of infection that hadn’t yet cleared. Andre spent another four days at Methodist Charlton receiving treatment for these conditions, and he was able to go home without additional surgery.

“I couldn’t have made it through all this without my wife,” Andre says. “She helped me through it and literally was there so I wouldn’t be alone.”

Melissa adds, “I owe a great deal of gratitude to all the doctors, nurses, and staff members at Methodist Charlton for saving my husband’s life — and equally for providing that same level of commitment to the entire community.”

As the couple’s next travel date approached, Andre and his care team decided it would be wiser for him to stay grounded while Melissa traveled to Israel. They now have plans to see Europe. “We’ll save Egypt for another time,” Andre says. “Thanks to Methodist Charlton, we have that option.”

» WE’RE HERE FOR YOU
Learn more about the emergency care services at Methodist Charlton at MethodistHealthSystem.org/Charlton-Emergency.
Mike Kruizinga might be known for his local realty expertise and radio show Inside Real Estate on radio station KLIF, but long before he was buying and selling property, he was developing another interest. Mike has been riding motorcycles since he was 17. Now 41, the seasoned biker knows that two of the keys to riding are always having multiple exit options on the road and being ready to react quickly.

A traffic slowdown on a local highway in March tested Mike’s riding acumen like never before.

“Traffic was going about 30 to 40 miles per hour because of a slowdown up ahead, but the car in front of me slammed on its brakes,” says Mike, who wasn’t wearing a helmet that day.

“I couldn’t move left because of traffic; I couldn’t move right because there was debris on the shoulder. My choice was to hit the car in front of me or lay the bike down. So I laid it down.”

The 2004 Harley-Davidson® V-Rod® Muscle had minimal damage, but Mike’s next ride was in the back of an ambulance. Fortunately, Methodist Mansfield Medical Center’s trauma team was ready and waiting to assess his injuries and care for his wounds.
Looking out for trauma patients
When Mike arrived at the Methodist Mansfield emergency department, Ashkan Bidgoli, DO, emergency medicine physician on the medical staff, diagnosed him with seven broken ribs and a broken collarbone, all on the left side. In addition, Mike had severe road rash on his head, neck, and leg from where his skin skidded unprotected along the highway.

Doctors performed a head-to-thigh CT scan to catch any irregularities or areas of concern, but no additional injuries were found.

“Painful as they are, rib fractures typically don’t require an operation,” explains Andrew Standerwick, MD, surgeon on the medical staff at Methodist Mansfield. Dr. Standerwick was on call when Mike arrived at Methodist Mansfield and supervised Mike’s care during his stay. “We do keep a close eye on breathing to be sure the lungs aren’t punctured by the broken ribs and that they are expanding properly to prevent fluid collection in the chest cavity. Everything looked good for Mike.”

Mike’s broken collarbone (clavicle) warranted the attention of Edward Mairura, MD, orthopedic surgeon on the medical staff at Methodist Mansfield. “Since Mike’s clavicle fracture wasn’t an open fracture [meaning it didn’t break the skin], which requires emergency surgery to fix, we presented options for elective surgical or nonsurgical treatment,” Dr. Mairura says. Mike opted for the nonsurgical approach, using a sling and physical therapy to gradually increase his range of motion.

“The hospital was really good about explaining my options and not pressuring me to make a quick decision,” Mike says.

Back on the road
Mike’s weeklong hospital stay focused on pain management and observation to be sure no additional injuries surfaced. He left with a sling for his shoulder and minor weight-bearing restrictions on his shoulder and arm. Mike is now working through rehabilitation and is back to full throttle in his real estate business.

“Dr. Standerwick was great,” Mike says. “He showed genuine concern for my recovery.”

With sufficient recovery time and careful attention to physical therapy, Mike is expected to have full range of motion again. He hopes to return to the airwaves after he finishes healing. He’s also planning to get back to riding, with a few modifications.

“I’ll be adding a helmet, and possibly a ballistic vest for lightweight, additional chest protection, to my road gear,” Mike says. “No matter how much you think you know what you’re doing, you can’t control all the factors.”

» YOU CAN COUNT ON US

Learn more about Methodist Mansfield’s emergency care services at MethodistHealthSystem.org/Mansfield-Emergency.
SKIP REDD WILL RETURN TO TEACHING CHOIR THIS FALL AFTER SPINE SURGERY AT METHODIST DALLAS

» IN HIS WORDS
Watch Skip Redd share his traumatic story in a video at MethodistHealthSystem.org/Media.
When music teacher Skip Redd hosted his choir and band students to an end-of-school-year party at the local trampoline park, he never imagined that in one afternoon his life would change.

A trampoline fan since his own childhood, Skip promised his students a big show. “I landed the front flip, although not quite on my feet,” he remembers. “I tried to get more height for the backflip, but didn’t get enough. So when I came down, I landed on my head.”

Skip broke his neck in two places and was instantly paralyzed. First responders had him airlifted to Methodist Dallas Medical Center, where he was evaluated by Bartley Mitchell, MD, medical director of endovascular surgery and neurosurgeon with Methodist Moody Brain and Spine Institute.

From 9:30 p.m. to 6 a.m., Dr. Mitchell operated on Skip, trying to give him the best possible chance to walk again.

‘Willing to go the extra mile’
Methodist Dallas’ neurosurgery services brings together expertise, technology, and compassion for the treatment of neurological disorders. Patients like Skip benefit from not only the latest diagnostic and treatment protocols, but from experienced physicians who collectively perform more than 1,200 neurosurgical procedures each year as well.

“When Skip fell on the trampoline and fractured his neck, it caused a dislocation of the bones,” says Dr. Mitchell, who specializes in spinal disk and spinal fusion procedures. “This pinched his spinal cord, causing him to be nearly completely paralyzed at that moment.

“We knew that we needed to take the pressure off of his spinal cord as quickly as possible to offer him the best possible chance at having any recovery of his spinal function.”

Dr. Mitchell began operating from the front side of Skip’s neck, using plates and screws to realign his dislocated bones. Then from the back side of his neck, the surgical team removed the bone and ligament that compressed his spinal cord.

“Our aim is to offer the highest-quality neurosurgical service available anywhere, and we are willing to go the extra mile to provide the best care for our patients,” Dr. Mitchell says. “In this case, it meant operating all night long, not knowing if this would actually improve Skip’s paralysis, but we believe in giving someone the chance to make a meaningful recovery.”

On his way back to school
While the original best-case scenario for Skip’s recovery was the function of one hand so he could feed himself, he has surpassed expectations and is now walking without a cane and driving short distances.

“Skip’s recovery truly is phenomenal, especially given the extent of his initial spinal injury,” Dr. Mitchell says. “There are many reasons why Skip made such a fantastic recovery, including the immediate care and surgery he received from our team, but also the nursing and rehabilitation care he received at Methodist Dallas.”

Three times a week, Skip works on leg strength with a physical therapist, and twice a week, he returns to Methodist Dallas for occupational therapy. His ultimate goal was to make it back to the classroom, and this fall, he’ll be teaching choir once again.

“I’ve had wonderful care at Methodist,” Skip says. “They were kind to me and treated me like a human being when sometimes I didn’t feel like one.

“Now I want to get back to work mentally and physically. I want to just be normal — to be in the classroom and make music again.”

ARE YOU IN PAIN?
At MethodistHealthSystem.org/Dallas-Neuro, you can take our Back and Neck Pain Assessment and learn more about the Methodist Moody Brain and Spine Institute.
World-class care, close to home.

In 2014, Methodist Health System became the first member of the Mayo Clinic Care Network in Texas. Today our medical staff is collaborating with Mayo Clinic specialists to tackle the toughest medical conditions and provide you with world-class care right here at home. Trust. Methodist.

MethodistHealthSystem.org/Mayo
There are more than 100 trillion bacteria living in the digestive system. That’s more than the number of cells in a person’s body!

Some of these bacteria are harmful, but many of them are good. The right balance of bacteria is extremely important. If this balance is off, health problems may occur. That’s why helping good bacteria thrive may benefit digestion and overall health.

What are probiotics?
Probiotics are live organisms similar to the ones in your body and have many health benefits.

“Probiotics work by supporting the good flora that naturally exist in our digestive tract,” says John Weaver, MD, JD, family medicine physician with Methodist Breckinridge Family Medical Group. “They are beneficial bacteria that help aid in digestion, synthesize certain vitamins, and play a role in our immune response to inflammation and infection.”

Specifically, probiotics can:
• Boost the immune system
• Keep skin healthy
• Help ease inflammatory bowel disease symptoms
• Reduce the frequency of respiratory infections
• Relieve diarrhea.

Probiotics can be found naturally in yogurt, kombucha tea, kimchi, sauerkraut, sourdough, kefir, and miso. They are also available as supplements.

“For most people, it is a good idea to have a diet rich in probiotic foods or take a probiotic supplement,” Dr. Weaver says.

“However, for people with cancer or those who lack a normal immune system, avoid supplementing with probiotics,” he cautions. “Talk with your doctor before taking a probiotic supplement.”

What are prebiotics?
Certain foods help to feed the good bacteria in your gut. These foods are called prebiotics.

A prebiotic is a nondigestible carbohydrate that serves as a fuel source for a probiotic. Particular types of fiber and carbohydrates are prebiotics and may aid digestion.

“It is believed that prebiotics can aid in the absorption of some minerals, including calcium,” Dr. Weaver says.

“Additionally, prebiotics aid in the production and maintenance of probiotics, which themselves aid digestion, especially in keeping the digestive tract moving.”

So when shopping, add these prebiotic foods to the grocery list:
• Almonds
• Artichokes
• Asparagus
• Bananas
• Onions
• Soybeans
• Whole-wheat items.

Teamwork for a healthy gut
Prebiotics and probiotics work together, so for the biggest benefit, eat prebiotic and probiotic foods together. For example, try yogurt topped with bananas and almonds, or top grilled asparagus with aged Parmesan cheese. Your healthier digestive system will thank you for it!

ASK YOUR DOCTOR
If you’re wondering whether a probiotic supplement is right for you, find a primary care provider to offer some advice. Go to MethodistHealthSystem.org/Primary-Care.
In the weeks following her breast cancer diagnosis last summer, Kristi Gibbs quickly became preoccupied with the things that consume many cancer patients. She juggled doctor appointments, cleared her schedule for surgery — and became determined to beat this thing.

“I just wanted to get better and get back to my life,” recalls the 47-year-old Garland resident, an accountant and mom of a 12-year-old daughter who does competitive gymnastics. “There wasn’t time to think about much else.”

Because she was focused on getting to the finish line, Kristi says she tried not to worry about matters like post-surgical scarring, assuming it would be inevitable. “When my doctor first told me there was a surgery option that could minimize scarring, I was surprised,” says Kristi. “I had never heard of it before.”

A game-changing option

As part of her treatment, Kristi underwent a bilateral mastectomy and surgery on her axillary (underarm) lymph nodes last October. On the advice of her surgeon, Kristi chose a surgical option known as Hidden Scar™.

During a Hidden Scar procedure, the surgeon uses an Invuity® retractor — a lighted, size-adjustable tool that offers increased visibility and agility — to make small incisions in areas of the body that are less visible, like the underside of the breast or the underarm. The surgeon then uses the tool to safely tunnel to the area where the tumor is located.

“Compared to traditional surgery, where the incisions are typically larger and made much closer to the tumor, Hidden Scar procedures result in scarring that’s considerably less noticeable,” explains Jenevieve Hughes, MD, FACS, breast surgeon on the medical staff at Methodist Richardson Medical Center.

“The location of Kristi’s tumor meant that we could enter from underneath her breast, which made her an excellent candidate for Hidden Scar,” Dr. Hughes continues. “We were even able to perform her lymph node surgery through the same scar.”

Combined with the technique’s potential noncosmetic benefits, such as reduced pain at the incision site and fewer chances of tissue damage and other complications, Dr. Hughes says that Hidden Scar is a “game-changer” option for breast cancer patients.

“In the past, patients had little choice but to deal with prominent post-surgery scarring that made them feel less confident about their appearance or that served as a reminder of their cancer whenever they looked at the area,” Dr. Hughes says. “The Hidden Scar surgery offers an option for a better outcome that’s more empowering for patients.”
A positive post-surgery experience

Although Kristi says it took a while before she was ready to look at her scars herself, she felt good about the appearance almost immediately. “Each time I visited my plastic surgeon for follow-up appointments, he commented about how good I looked, as did his nurses,” she remembers. “When I eventually felt ready to look at myself, I was very comfortable with the result.”

Kristi says she was also pleased with the pace of her post-surgery recovery. Within a few days of her procedure, she could manage without pain medication, and a few weeks later, she was able to resume most of her normal activity, as well as begin a course of chemotherapy.

Overall, Kristi says her experience underscores the importance of finding a medical team that you feel comfortable with and who can educate you about available options. “As soon as I met with Dr. Hughes, I knew she was the right surgeon for me,” Kristi says. “She was so friendly and positive, always greeting me with a smile and a hug. The team at Methodist Richardson is the same way. On the day of my surgery, they were very caring and reassuring — it made me feel like I could get through it. “Everyone made me feel like I had a say in my treatment — that we were tackling my recovery as a team.”

» CANCER CARE IN A COMFORTABLE SETTING

Learn more about the physicians and services available at the Methodist Richardson Cancer Center at MethodistHealthSystem.org/Richardson-Cancer.
Thanks to robotic surgery, John Kapadia is walking again with ease and confidence.

Make mine a Mako®

Robotic arm-assisted joint replacement surgery comes to Methodist Richardson
Jithendrakumar “John” Kapadia has called Dallas home for more than 50 years. He and his wife, Rekha, raised their three children here and now enjoy spending time with their grandchildren. But over the last few years, increasing joint pain in their knees began to keep them from living the life they wanted.

“At 80 years old, I expected to have joint pain, but not so much that walking or driving a car was extremely painful,” John says. “I knew I had to try something to get relief from the pain, but I was resistant to having joint replacement surgery. When physical therapy and cortisone shots didn’t help enough, I began to consider it.”

Encouraged by a few of his friends who had successful knee replacements, John met with Diane Litke, MD, orthopedic surgeon on the medical staff at Methodist Richardson Medical Center, to discuss his options. She caught his attention when she suggested robot-assisted surgery.

Meet the Mako® robot
At first John was skeptical. Dr. Litke had asked him to consider being the first patient at Methodist Richardson to undergo knee replacement using the new Mako robot.

“When Dr. Litke first talked to me about the Mako robot, I wasn’t sure it was a good idea,” John recalls. “I decided to talk to my brother, who is a retired orthopedic surgeon in India. He explained that it wasn’t a robot doing the actual surgery but a machine that the surgeon would use to help guide their movements. He was very enthusiastic, so I decided to go for it.”

So how does Mako help? Using a CT scan of the patient’s joint, the Mako technology creates a 3D image of his or her bone anatomy. The surgeon then uses that image before and during the surgery to plan and to virtually balance the joint and achieve individualized placement.

“The Mako robotic arm-assisted technology helps surgeons provide patients with a personalized, more predictable surgical experience for knee [total and partial] and total hip replacement,” Dr. Litke explains. “We are able to create a patient-specific, preoperative plan that enables more accurate implant positioning, which is crucial to long-term success.”

Walking with confidence
Dr. Litke performed John’s total knee replacement surgery on a Wednesday, and he was up and walking the next day. His children joked that they hardly recognized his gait since he could walk straight and without a limp.

After seeing her husband recover so quickly and with very little pain, Rekha decided she, too, wanted to have the same procedure.

“The Kapadias are true success stories for the Mako robot and the power of its technology,” Dr. Litke says. “What I like best about Mako is that I can know everything about the fit of the implant is perfect before I even begin the surgery. Because of this customization, John and Rekha have relief from joint pain and have the agility to keep up with those grandkids of theirs. That’s the kind of freedom joint replacement gives patients, and Mako makes it even better.”

“John and Rekha have relief from joint pain and have the agility to keep up with those grandkids of theirs. That’s the kind of freedom joint replacement gives patients, and Mako makes it even better.”
— DIANE LITKE, MD, ORTHOPEDIC SURGEON

John Kapadia’s knee replacement surgery was such a success that his wife, Rekha, decided to have the same procedure.

» IS MAKO RIGHT FOR YOU?
Find an orthopedic surgeon to discuss your options at MethodistHealthSystem.org/FindADoctor.
When you go to sleep each night, your body goes to work, taking on a kind of housekeeping role throughout the body. Science shows that mentally, sleep facilitates memory consolidation, while physically, it helps the body go through a restorative process.

**How sleep works**
Our time snoozing breaks down into four sleep cycles, each lasting about five to 15 minutes. There are two kinds of sleep, REM and non-REM. (REM stands for rapid eye movement and describes how during this phase of sleep, your eyes move quickly in different directions.)

The first three phases are non-REM cycles, during which the body relaxes, breathing and heart rate slow, and blood pressure decreases.

During REM sleep, our brains become very active and we do most of our dreaming. Heart rate and breathing can increase and become irregular, and our muscles are paralyzed from the chin down — thought to keep our bodies from acting out our dreams. “Ideally, 25 percent of your sleep should be REM sleep, with the first REM cycle happening 90 minutes after you drift off,” explains Stephen Mueller, MD, pulmonary medicine physician on the medical staff at Methodist Charlton Medical Center. “Each REM cycle lasts longer than the one before it.”

**Chores while you snooze**
During your non-REM deep sleep, the priority is body repair and restoration. Tissue growth and repair occur with the help of released human growth hormones. Nerve cells are renewed, toxins are neutralized, the chemical levels throughout the body are normalized, and energy is restored. REM sleep is largely devoted to

restoring and repairing the brain. Neurotoxins are removed, and the mind goes to work organizing long-term memories and integrating new information, such as learning how to do things.

**Getting those zzz’s**
The best way to get the sleep your body needs is to have good sleep habits. Try to establish a stable bedtime and wake-up time. Then about an hour before bedtime, limit screen time, eliminate eating and drinking, and clear and calm your mind. Pay attention to the temperature of your sleeping space (not too hot or cold), as well as how much light is present in the room — the darker the better.

“Sleep affects almost every type of tissue and system in the body,” Dr. Mueller says. “The health of your organs, strength of your immune system, mood, and disease resistance are all tied to getting adequate amounts of quality sleep.”

» **CONCERNED YOU AREN’T GETTING GOOD SLEEP?**
Talk to your doctor about participating in a sleep study at the Methodist Charlton Sleep Diagnostic Center. Learn more at MethodistHealthSystem.org/Charlton-Sleep.
When Willie Andrew Brezell Jr. received a Parkinson’s disease diagnosis nine years ago, he had a choice to make.

“I could feel sorry for myself or I could accept that it’s a life sentence, not a death sentence,” he says. “If Parkinson’s is going to get me, it’s going to have to catch me.”

Thanks to spin classes three times a week, Willie has overcome several debilitating effects of Parkinson’s, including a pronounced tremor, stiffness in his limbs, and fatigue.

At first, he couldn’t ride 1 mile. One year into it, he can now ride 30 miles. “My body is stronger,” he says. “I can go up and down stairs without falling. Before I began exercising, I couldn’t even tie my shoes.”

Creating new connections
Although research on the impact of exercise on Parkinson’s disease is ongoing, Roberto Nieto, MD, neurologist on the medical staff at Methodist Mansfield Medical Center, says certain physical activity may help protect healthy nerve cells that produce dopamine, preventing them from deteriorating as quickly. Tai chi, boxing, and cycling are all activities shown to help with this.

“For example, cycling’s repetitive nature may help create new connections around damaged areas of the brain,” he says. “In a sense, patients improve and reset the clock to when they were doing better with their disease.”

Make it a point to move
The best place to start is with supervised physical therapy, says Cindy Nolan, PT, MS, GCS. At Methodist Mansfield, Nolan and several of her fellow physical therapists are certified in a specific type of Parkinson’s care. They can assess patients and develop a program that fits their conditions and is safe for them.

“They can take their personalized plan and extend that into a community-based fitness program,” she says. “Exercise should be as important as taking their medication.”

That’s why Dr. Nieto encourages his patients with Parkinson’s disease to try working physical activity into their lives from the disease’s onset.

“The sooner patients can get moving, the more they can help their brains build the connective memory to maintain their mobility and thrive despite their disease.”

Willie Andrew Brezell Jr. (right) benefits from a specially designed spin class at Cyclone Indoor Cycling, a gym owned by his friends Tom and Sherry McCullouch (left). He first got moving when Sherry encouraged him to walk in the Methodist Mansfield Run with Heart 5K. Save the date for next year’s event on Jan 26. Register at MansfieldRunWithHeart.org.

» FINDING HELP
To find a neurologist to work with you or a loved one on managing Parkinson’s or other degenerative diseases, visit MethodistHealthSystem.org/FindADoctor or call 214-444-7303.
**Methodist opens new Convenient Care Campus**

Methodist Medical Group welcomed local leaders and community members to a special grand opening celebration for the new Methodist Convenient Care Campus on Thursday, June 7. The ribbon-cutting ceremony opened the doors to the $14 million, 31,000-square-foot campus located at 4560 Lake Ridge Parkway in Grand Prairie. The facility provides a new concept in access for patients, featuring urgent care, primary care, and specialists’ offices all in one location.

“Methodist continues to look for ways to improve our patients’ access to quality care close to home,” says George Williams, MD, MMM, FACEP, president, Methodist Medical Group. “We’ve strategically looked to expand ambulatory care in the communities of our service areas, and we want the residents of South Grand Prairie to know how much we value them and want to meet their needs.”

**LOVE, LAUGHS, AND LITTLE ONES:** For the 35th year, the Neonatal Intensive Care Unit (NICU) at Methodist Dallas Medical Center put on a Preemie Party to celebrate children who are now flourishing, despite spending as long as a few months in the NICU. They along with their families get to come back to campus, eat some cake, play with animals in the petting zoo, and enjoy an array of other activities. More than 100 families registered for the June 2 “Candy Land”–themed event that received local media coverage by NBC 5 and Telemundo.

**BE OUR GUEST:** Methodist Charlton Medical Center’s seventh annual EMS Week Appreciation Cookout for first responders took place May 24. More than 175 emergency medical services (EMS) providers, firefighters, and police officers attended the cookout. Special thanks to the Duncanville Knights of Columbus for helping put on the event for the fourth year in a row.

**METHODIST RICHARDSON ROCKS WILDFLOWER!**

Methodist Richardson Medical Center celebrated another successful Wildflower! Arts and Music Festival. The three-day event, held May 18 to 20, drew about 70,000 fans to Galatyn Park to hear budding artists and headliners alike. This year’s Methodist Richardson Amphitheater Stage hosted acts including Kool and the Gang, the Gin Blossoms, and the Goo Goo Dolls, to name a few. Methodist Richardson volunteers handed out glow bracelets and beach balls, while festival-goers made memories at the Methodist Richardson photo booth.
WHAT DO YOU WANT TO BE WHEN YOU GROW UP?

The Methodist Health System/Methodist Dallas Intentional Inclusion and Diversity Collaborative went to Hogg Elementary School on May 23 to talk about their careers. Students chatted with Methodist staff members who work on both the clinical and corporate sides of the hospital, including in environmental services, trauma, and other integral hospital departments.

This is the second year that Methodist has participated in Career Day.

HEALING ON A HIGH NOTE:

Methodist Mansfield has partnered with Mansfield ISD to bring live music to patients during their hospital stay. Research shows that music triggers a happy response in the brain and can help patients cope with stress and anxiety.

Shown here, Timberview High School band students (from left) Nikki Doan, Augustin Martinez, Natalie Doan, Hunter Wynne, and Noah Hayes perform in the hospital’s cardiac unit.

TAKING STEPS FOR MENTAL HEALTH:

A team from Methodist Richardson’s behavioral health unit put its best foot forward at this year’s NAMI Walks event on May 5 in Frisco. The National Alliance on Mental Illness (NAMI) holds the 5K event to raise awareness about mental illness and stomp out the stigma that surrounds it. The Methodist Richardson team also manned a booth to offer information about the services offered at the Methodist Richardson – Campus for Continuing Care.

A TOUR OF TABLES:

On June 1, the Methodist Charlton Medical Center Auxiliary raised almost $3,000 at its eighth annual Tour of Tables. This year’s theme was “Touring Through Time With Inspiring Women.” Local businesses, nonprofit organizations, and Auxiliary members decorated tables featuring inspiring women and their accomplishments, including Michelle Obama, Oprah Winfrey, Barbara Bush, and Princess Diana (shown at right). Funds raised will support services offered at Methodist Charlton.

KEEPING ATHLETES IN THE GAME:

This spring, physicians and staff members at Methodist Mansfield Medical Center volunteered to conduct 946 sports physicals and 143 echocardiograms for student athletes in the Mansfield and Midlothian ISDs and South Grand Prairie middle and high schools. The sports physicals provided opportunities for athletes in the schools to receive quality physical exams.
Using books to better children’s lives

Reading is a gift that lasts a lifetime. At Methodist Health System, we’re working to instill an appreciation for the written word in our youngest patients. Methodist Health System began participating in the Once Upon a Month literacy initiative in 2017 with a goal to ensure books are readily available. Methodist is focusing its efforts on families living within 21 different ZIP codes in its service area, who can register a child to receive a book and a newsletter every month for free. Women who deliver their babies at Methodist Charlton and Methodist Dallas Medical Centers can sign up for the program before they even leave the hospital.

Literacy leads to other opportunities

Cynthia Yung is the executive director of The Boone Family Foundation, one of the program’s sponsors. She says her organization found a perfect partner in Methodist because they share a common purpose — to help better the lives of people living in Oak Cliff and its surrounding communities.

“In order to have economic security, you need to be in an environment where you can build that for yourself,” Yung says. “That environment is really dependent on your income, which is dependent on your education, which is dependent on your health. All of these things work together so people can truly live an independent life.”

Support from another state

Along with The Boone Family Foundation, Methodist partnered with United Way of Metropolitan Dallas and Ferst Readers, which is headed by Betsy Wagenhauser. Wagenhauser lives in Georgia, but linking the Ferst Readers literacy program with Once Upon a Month was a serendipitous opportunity she couldn’t pass up. She knew some of the children benefiting from the program could grow up and attend a school that’s dear to her heart.

“I used to teach at Sunset High School in Oak Cliff,” she says. “I have an emotional connection to helping this community because I used to live there.”

Small investment, big impact

Once Upon a Month isn’t just a “book program.” Wagenhauser says this program has the potential to change the trajectory of so many children’s lives thanks to an investment in literacy. Danielle D’Aquisto, BSN, RNC-OB, nurse manager, mother-baby unit at Methodist Dallas, says nearly 300 families have signed up for the program through this hospital alone. The program recently expanded to reach families at the Methodist Dallas Golden Cross Academic Clinic and local pediatrician offices.

“Our hope is even more children will get a strong start to a healthier future,” D’Aquisto says.
LET'S RIDE, DALLAS!
Join us on Saturday, Nov. 3, for a 20-mile trek on Dallas' only closed-road bike ride. See page 4 for details.

Robotic surgery is a game changer in the hands of skilled surgeons. This minimally invasive technique can often offer patients less pain and scarring, shorter hospital stays, and faster recoveries.

Methodist Dallas Medical Center is a Surgery Epicenter, designated by Intuitive Surgical, the makers of the robotic da Vinci® Surgical System. A Surgery Epicenter is a surgical training program with a highly experienced surgeon who demonstrates best practices and excellent surgical results.

We're proud to bring you advanced surgical procedures with compassionate care — just one more reason to trust Methodist.

To find a physician, call 214-444-7303.

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 Dallas Medical Center, 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.