SPECIAL DELIVERY
Methodist Richardson helped Ruchi Desai when eclampsia caused an emergency situation for her and her unborn baby.

PLUS

THE EASIEST TEST YOU’LL EVER TAKE
Learn how to perform a breast self-exam

Is your sleep position costing you VALUABLE ZZZ’S?

BACK-TO-SCHOOL BASICS
Get advice on healthy snacking and screen-time limits
FEATURES

4  |  Apples to apples
Will you go red, green, or yellow this fall?

25  |  What can da Vinci do for you?
The da Vinci® Surgical System helps surgeons perform complex and delicate procedures with unmatched precision.

TO YOUR HEALTH

8  |  Veggie tales
It’s easier than you think to get your kids to eat their greens.

10  |  Fight the flu
An annual flu shot can greatly lower your chance of getting the flu.

23  |  The easiest test you’ll ever take
Learn what to watch for while doing your monthly breast self-exam.

PATIENT STORIES

16  |  Expecting the unexpected
Ruchi Desai and her baby girl, Anaira, received lifesaving care at Methodist Richardson.

21  |  A search for someone who cares
Methodist Richardson was there when Shawna Rasco needed more than cookie-cutter breast cancer treatment.

p. 13  |  She’s got the beat
When she’s not busy saving lives, Tulika Jain, MD, plays the keyboard in an ‘80s cover band.
connect with us
ONLINE

The goods about this gourd
You’re probably not alone if deep down you think of autumn as “pumpkin spice season.” From scented candles to flavored lattes, we can’t get enough of the orange gourd — and that might be a good thing. Pumpkins actually pack a nutritious punch. Learn more and get some delicious, healthy recipes in our blog at Answers.MethodistHealthSystem.org/Pumpkin-Recipes.

Out & about: Walk with us!
Thanks to the generous donations of Susan G. Komen Dallas County, Methodist Health System has helped hundreds of underinsured women in Dallas County get essential breast cancer services. Now it’s our turn to give back to Komen! Come walk with the Methodist Marchers for Hope in the Komen Dallas County Race for the Cure on Saturday, Oct. 28, at NorthPark Center. You can register at komen-dallas.org. For more information, contact Linda Gage at lindagago@mhd.com or 214-947-1771.

Where to find the freshest produce
There’s nothing like getting a pumpkin straight from the patch, an apple right from the tree, or an ear of corn just off the stalk. We mapped out our favorite farm stops throughout the area for you to find the freshest fall produce. Check out our blog at Answers.MethodistHealthSystem.org/Farm-Fresh-Fall.

Healthy foods at the state fair?
Yes, the State Fair of Texas offers more than funnel cakes and Fletcher’s corny dogs (although don’t beat yourself up over that delicious splurge!). There are dozens of food options that are both healthy and delicious, and we’ve got them listed for you in our blog: Answers.MethodistHealthSystem.org/Healthy-Fair-Food.

Get up and give for North Texas Giving Day!
North Texas Giving Day is an online giving event for people to unite and raise as many funds as possible for North Texas nonprofits on one day. Help Methodist Health System Foundation and Methodist Richardson Medical Center Foundation continue to provide lifesaving services to our communities by making a donation on Thursday, Sept. 14, at northtexasgivingday.org. With your help, we can surpass the amount raised last year and make this an even more successful North Texas Giving Day!
THE RED DELICIOUS VARIETY OF APPLE, though easy to find and quite versatile, isn’t the only game in town. Read on for highlights of other varieties readily available in North Texas grocery stores.

Mostly reds
- **FUJI** — Their sweet, bold flavor keeps well at room temperature. They can be baked, but fresh is best.
- **GALA** — Enjoy Galas fresh in salads or snacks, with cheese, nuts, or vinaigrette. Baking can make them rubbery.
- **HONEYCRISP** — These apples taste like they sound: crisp and sweet, with a honeylike flavor. Grab some off the tree or turn them into applesauce.

Going green
- **GRANNY SMITH** — Their tart taste and firm texture pairs well with savory dishes. Grannies can be grilled, baked, and pan-seared.

Yummy yellow
- **GOLDEN DELICIOUS** — Sweet and versatile like their red cousin, these yellow beauties soften quickly, so don’t let them sit too long.

Under the skin
All apple varieties carry the same nutritional value and the same 50 to 125 calories, depending on size. The skins contain more fiber, vitamins, and minerals than the flesh alone, but that doesn’t mean your skin-peeling friends (or children) should find another snack.

“Apples have lots of potassium and vitamin C, plus their high-fiber content helps with digestion and healthy gut bacteria,” says **Heather Beard, RD, LD, CDE**, on staff at Methodist Richardson Medical Center. “If you just can’t eat the skin, that’s fine. It’s not all or nothing.”

Serving ‘em up
For a satisfying snack, Beard recommends pairing your favorite apple with a protein, like nuts, low-fat cheese, or peanut butter, to help you feel full longer.

Can’t decide which variety you like? Try one a day. “There’s no wrong way to eat an apple; just pick the flavor you like best,” Beard says.
4 of our fave fall foods

1 Yams and sweet potatoes
These fiber-rich vegetables also offer a heaping helping of potassium and vitamin A. Potassium can help control blood pressure, while vitamin A gives a boost to your immune system and is great for your eyes and skin.

One way to enjoy them:
Diced and added to your favorite chili or soup

2 Cauliflower
This nonstarchy white vegetable is chock-full of vitamins, minerals, and plant-based compounds called phytochemicals, which help keep arteries clear.

One way to enjoy it:
Steamed with walnut oil, mustard, and lemons

3 Brussels sprouts
These vegetables that look like mini cabbages are low in calories and high in vitamin C, fiber, and folate. Brussels sprouts also contain antioxidants that protect your cells and may even reduce your risk for cancer.

One way to enjoy them:
Steamed with walnut oil, mustard, and lemons

4 Grapes
Grapes may contain the very same antioxidants that give red wine its heart-healthy benefits.

One way to enjoy them:
Frozen, like mini ice pops

>> IT’S A SLICE
Find your favorite way to enjoy apples with recipes from Whole Foods in Richardson at Answers.MethodistHealthSystem.org/Apple-Recipes.

>> CALLING ALL PUMPKIN LOVERS
It’s no surprise and always worth mentioning: pumpkin. It’s the official food of fall, and there are many delicious things you can do with it. Read more in our blog at Answers.MethodistHealthSystem.org/Pumpkin-Recipes.
Back, stomach, or side

Find the sleep position that’s right for you
Now that long school days are back in session, it’s important to make sure the entire family is getting a good night’s sleep.

A good mattress, cool temperature, and powering off electronic devices a few hours before bedtime can help you get better zzz’s. So can changing your sleep position. It’s an easy way to help manage other health conditions that may be getting in the way of your rest.

Here are a few examples:

- **Snoring and sleep apnea.** Basically, you can sleep in any position, except on your back. On your stomach is a good option, but be careful if you have back and neck pain because it can add more pressure to your muscles and joints.

- **Acid reflux.** Sleep on your back with your head elevated on a pillow.

If this doesn’t feel comfortable, try on your side without the pillow.

- **Back and neck pain.** The worst position for this pain is sleeping on your stomach. On your side or back are both great options, but on your back is the healthiest, as this position permits you to align your head, neck, and spine in a neutral position.

- **Pregnancy.** Sleeping on your side is the best option, specifically, on your left side, which boosts circulation for you and your baby.

Try the sleep test

**Stephen Mueller, MD**, pulmonologist on the medical staff at Methodist Charlton Sleep Diagnostic Center, says there is no one-size-fits-all sleep position. However, there’s an easy way to tell what might be your best fit.

“How you wake up in the morning is probably the most comfortable position for you,” Dr. Mueller says.

“Each person will have to determine what works best for them.”

Changing up your sleep position is sometimes easier said than done, but there are things that can help. You can buy devices to keep you from rolling onto your back, and body pillows can also help you stay in a certain position.

If changing your sleep position isn’t helping, it’s worth asking your doctor for a referral to a sleep specialist.

After all, according to an Irish proverb, a good laugh and a long sleep are the best cures in the doctor’s book.

**>> SLEEP STOPPERS**

Something other than your sleep position could be getting in the way of your sleep. Check out “What’s Stopping Your Sleep?” on our blog at Answers.MethodistHealthSystem.org/Sleep-Stoppers.
Getting children to eat their veggies has long been a parenting struggle. And there has to be an easier way than bribing them with dessert, right? Kathy Ross, MHA, RN, wellness director at Methodist Health System, shows how it’s easier than you think to get your little ones to eat their greens. Let’s get to snacking on these three quick tips.

1. Add veggies early and often
The best way to get them excited for veggies is to introduce them early on in their lives. When beginning to introduce foods to babies, first offer vegetables like peas and carrots before introducing the sweeter pears and bananas or even sweet potatoes. They’ll become accustomed to the “blander” taste of hearty vegetables before expecting something sweet.

“The sooner the child develops a taste for vegetables, the easier it is for them to continue eating them as they grow,” Ross says.

2. Sneak veggies into foods they like
If your children have already developed a taste for the sweeter things, and not so much for the heartier veggies, there are tons of easy ways to sneak them into snacks and treats without their noticing.

“Fold pureed cauliflower into mac ‘n’ cheese or finely chopped kale in spaghetti and meatballs,” Ross says. “Pureed spinach can even give brownies a nutritious boost.”

3. Recruit kitchen helpers
Letting kids be a part of the meal planning and preparation gets them more excited about the ingredients — including fruits and veggies.

“Take children shopping with you so they can choose the foods themselves,” Ross says. “Find two to three fruits and two to three vegetables, and allow your child to choose one of each to eat. By giving your child a choice, it’s a win-win. You know they are going to eat one of them, but they get to make that choice.”

When it comes to the cooking, kids can cut (safely), peel, arrange, mash, mix, and more. Let them decide how they will help.

Kids need five to seven helpings of fruits and vegetables every day to be set up for nutritional success. Finding ways to make them enjoyable helps to create that healthy habit. •

Kathy Ross gets a lot of her great ideas for kids’ meals from Jessica Seinfeld’s book Deceptively Delicious: Simple Secrets to Get Your Kids Eating Good Food. Cook up some new recipes for your little ones and yourself by getting a copy!
How much is too much?

Setting healthy limits for your child’s screen time

TECHNOLOGY CAN DO A LOT TO ENHANCE A CHILD’S LIFE. IT CAN ALSO DO A LOT TO HINDER A CHILD’S HEALTH.

“Excess screen time is associated with obesity, poor social skills development, and problems with attention and time management,” says Linda Phan, MD, pediatrician on the medical staff at Methodist Mansfield Medical Center. “There are just so many hours in a day, and time spent with technology means time taken away from activities that aid in a growing child’s brain development, like face-to-face interaction with people, free play, and hands-on play with real toys.”

KEEPING TRACK OF TIME

In 2016, the American Academy of Pediatrics (AAP) updated its recommendations to reflect our changing times and the latest research. (See table below.)

The AAP also recommends that families designate media-free times together, such as during dinner or car rides, as well as media-free locations at home, such as in bedrooms. In addition, it’s important to have conversations about online citizenship and safety, including treating others with respect online and offline.

MAKE THE MOST OF THEIR TIME

“Children get more out of screen time when parents actively watch and play with their kids,” Dr. Phan says. “Parents can ask their child to show them how to play or what they learned. The act of teaching makes you smarter.”

Dr. Phan also offers these ideas for when kids are away from a screen:

- Free play at home, with neighborhood kids, or at the park
- Creative time drawing or building
- Reading alone and together
- Collecting rocks, insects, or leaves
- Playing cards or board games
- Joining a sports team
- Going to museums or the zoo.

<table>
<thead>
<tr>
<th>AGE</th>
<th>SCREEN-TIME GUIDELINES</th>
</tr>
</thead>
<tbody>
<tr>
<td>Younger than 18 months</td>
<td>Avoid screen media other than video chatting.</td>
</tr>
<tr>
<td>18 to 24 months</td>
<td>Choose only high-quality programming, and watch it with your children to help them understand what they’re seeing.</td>
</tr>
<tr>
<td>2 to 5 years</td>
<td>Watch only one hour a day of high-quality programming. Watch it with your children to help them understand what they are seeing and apply it to the world around them.</td>
</tr>
<tr>
<td>6 years and older</td>
<td>Place consistent time limits on screen media, and make sure media doesn’t conflict with adequate sleep, physical activity, or other behaviors essential to health.</td>
</tr>
</tbody>
</table>

>>FOR EXTRA ADVICE

A family medicine physician or pediatrician on the Methodist Health System medical staff can be a great resource for helping you set healthy boundaries for your family — and not just when it comes to screen time. Find one today at MethodistHealthSystem.org/FindAPhysician.
Each year, millions of people come down with influenza, better known as the flu. The body aches, fever, chills, fatigue, and congestion can make you miserable. For people with underlying conditions, this seemingly routine virus can even become fatal.

If all that misery sounds like something you’d like to avoid, consider this: “The best way to not get the flu is getting the flu shot,” says Christine Liu, MD, family medicine physician at Methodist Richardson Medical Group. “I recommend anyone over 6 months of age get the shot as early in the season as possible.”

The flu shot doesn’t guarantee you won’t get the flu, but Dr. Liu offers four reasons the vaccine is still worth getting:

1. **It reduces your chances of getting the most common strains of flu that season.** Flu season lasts from October to May. Each year, before flu season begins, the Centers for Disease Control and Prevention announces which strains of flu it expects to be most active, and a vaccine is created that is tailored to those strains.

2. **It decreases your downtime.** If you do get the flu, the vaccine can shorten your recovery time from up to two weeks to only a few days.

3. **It protects those around you who may be more vulnerable.** Certain age groups, such as children and the elderly, as well as pregnant women and the chronically ill, are more susceptible to viruses like the flu. By getting the flu shot, you are more likely to stay healthy and not spread the illness to others.

4. **It lowers your risk for serious complications.** Seasonal flu is a serious virus that can cause other illnesses, like ear or sinus infections, hospitalizations for pneumonia, and even death.

>> **NEED TO GET YOUR FLU SHOT?**
Find Methodist Family Health Centers and Medical Groups near you at [MethodistFamilyCare.com](http://MethodistFamilyCare.com).

**Tips for staying healthy this flu season**

- Wash your hands or use sanitizer after blowing your nose or coughing into your hand. Try to cough into the crook of your arm to avoid spreading germs.
- Clean frequently handled devices, such as your cellphone.
- Avoid people if you’re sick or have been exposed. Adults are contagious the day before they show symptoms and up to seven days after symptoms begin. Children are contagious for a longer period.
- Tamiflu® (oseltamivir phosphate) can help decrease the length and severity of symptoms if started within the first 48 hours. It can also be used as a preventive for someone in close contact with a person who is sick.
Clark County, Oregon, has the highest number of new cases per 100,000 people.

Janet Ashley
Program Director
JanetAshley@MethodistFamilyCare.com
214-947-0033

When cold and flu season strikes, your neighborhood Methodist Family Health Centers and Methodist Urgent Care Centers are ready to treat you right, right now. Whether you need a flu shot, a family physician, or urgent treatment, trust your neighborhood Methodist Family Health Centers and Urgent Care Centers. Trust. Methodist.
Check out some of the happenings at Methodist Health System this season.

**FALLING FOR PINK AT METHODIST CHARLTON**
Saturday, Sept. 30
- 8:30 to 9:45 a.m., mammograms available
- 10 a.m. to 12:30 p.m., main program
- 12:30 to 1:30 p.m., free bra fittings available
Auditorium, Methodist Charlton Medical Center, 3500 W. Wheatland Road, Dallas, TX 75237
This fun, informative breast health event is for both men and women. There will be on-site mammograms, bra fittings, a “Just for Men” session led by male breast cancer survivors, a cooking demonstration, and refreshments.

**THE FACE OF MENTAL ILLNESS**
Thursday, Oct. 26, 11 a.m. to 2 p.m.
Auditorium, Methodist Charlton Medical Center, 3500 W. Wheatland Road, Dallas, TX 75237
This luncheon sponsored by the Best Southwest Partnership Healthcare Committee is focused on mental health. Championing the event are U.S. Rep. Eddie Bernice Johnson and state Rep. Toni Rose, both authors of bills pertaining to mental illness.

**METHODOLOGY MANSFIELD RUN WITH HEART**
Saturday, Nov. 4, 8:30 a.m. to 12:30 p.m.
Auditorium, Methodist Mansfield Medical Center, 2700 E. Broad St., Mansfield, TX 76063
Dress up in pink and join us as we celebrate the strength and courage of countless breast cancer survivors and fighters at this fun luncheon.

**BOOMER U: SCAM JAM**
Saturday, Nov. 4, 8:30 a.m. to 12:30 p.m.
Auditorium, Methodist Charlton Medical Center, 3500 W. Wheatland Road, Dallas, TX 75237
Every day, millions of Americans lose their hard-earned money to scams and frauds. Join Methodist Generations and AARP Texas for this free event to learn how you can protect you and your family. A shredding truck will also be on-site from 8 to 10 a.m.

**SPECIAL EVENT!**
**2017 Robert S. Folsom Leadership Award**
Honoring David B. Miller
Wednesday, Oct. 25, 6:30 to 9 p.m.
Grand Ballroom, Hilton Anatole Hotel, 2201 N. Stemmons Freeway, Dallas, TX 75207
$250 per ticket
Proceeds from the award will support the work of Methodist Health System.

**THE MAD HATTER TEA PARTY AT METHODIST RICHARDSON**
Saturday, Sept. 30, 10:30 a.m. to 1 p.m.
Methodist Richardson Medical Center, 2831 E. President George Bush Highway, Richardson, TX 75082
Don’t be late for this very important date! Come help us celebrate breast cancer survivors and fighters at this special event in their honor.

**PRETTY IN PINK AT METHODIST MANSFIELD**
Saturday, Oct. 14, 10 a.m. to noon
Women’s Center and Mansfield Café, Conference Rooms A and B, Methodist Mansfield Medical Center, 2700 E. Broad St., Mansfield, TX 76063

**MARK YOUR CALENDAR!**

For more information about sponsorships and tickets, call the Foundation at 214-947-4555 or email folsomaward@mhd.com.

For information about sponsorships and tickets, call the Foundation at 469-204-6990 or email richardsonfoundation@mhd.com.

For ticket information, call 214-947-5490.

To see the full list of prestigious guest presenters and reserve your place at this powerful luncheon, go to bestsouthwest.org/231/healthcare.

Proceeds from the event will support the work of Methodist Health System. For more information, visit Foundation.MethodistHealthSystem.org/Events/Folsom.

To see the full list of prestigious guest presenters and reserve your place at this powerful luncheon, go to bestsouthwest.org/231/healthcare.

To see the full list of prestigious guest presenters and reserve your place at this powerful luncheon, go to bestsouthwest.org/231/healthcare.

To see the full list of prestigious guest presenters and reserve your place at this powerful luncheon, go to bestsouthwest.org/231/healthcare.

To see the full list of prestigious guest presenters and reserve your place at this powerful luncheon, go to bestsouthwest.org/231/healthcare.

To see the full list of prestigious guest presenters and reserve your place at this powerful luncheon, go to bestsouthwest.org/231/healthcare.

To see the full list of prestigious guest presenters and reserve your place at this powerful luncheon, go to bestsouthwest.org/231/healthcare.
WHAT 4 PHYSICIANS DO WHEN THEY’RE NOT TREATING PATIENTS

It’s no secret that there are long hours in medicine, and this couldn’t be more true for the physicians on our medical staff. They spend hours visiting with patients, updating medical records, training medical students, and performing life-changing — or even lifesaving — procedures. But when the scrubs and lab coats come off, physicians fill their time in other ways, pursuing some pretty fascinating hobbies. Here’s a look at four doctors from each of our campuses and the interests that occupy their time outside the hospital. >>
Serving others seems to be a constant theme for Gregg Shalan, MD, JD. As medical director of Methodist Dallas Medical Center’s neuro critical care unit, Dr. Shalan works with critically ill patients who have experienced neurological issues like strokes or seizures. But his involvement helping others extends beyond medicine. In his free time, Dr. Shalan serves as a substitute justice of the peace and as a municipal judge.

“I’ve always had an interest in the judiciary,” Dr. Shalan explains. “I initially considered running for justice of the peace a few years ago, but instead began substituting for one in Dallas. Expanding on that, an opportunity arose in Cedar Hill for me to serve as a municipal judge, and I was appointed to the position.”

Dr. Shalan’s experience as a substitute justice of the peace began in 2010. Since then, he has heard cases involving evictions, small claims, and some misdemeanors. As a substitute, however, he is called in when needed, sometimes only a few times a year. In his role as a municipal court judge, he serves only a few days a month, dealing primarily with class C misdemeanors.

The limited amount of time in the courtroom works well with his medical schedule, allowing Dr. Shalan to follow both his passions — medicine and law.

“A lot of my co-workers find what I do interesting,” he says. “It’s so different than what we do here at the hospital. It’s a different aspect of people’s lives, and just like in healthcare, everyone has a different story.”

When she’s not saving lives, Tulika Jain, MD, cardiologist on the medical staff at Methodist Richardson Medical Center, has got the beat — as the keyboardist in Tulkit, an ‘80s cover band that, for the most part, has been playing together since the decade of big hair and bright colors.

Dr. Jain, along with two other band members, started Tulkit in high school but later parted ways while attending college and establishing their careers. Six years ago, they reunited and added three more members.

Between work and family commitments, Dr. Jain and her fellow band members make the most of the time they do have enjoying the hobby they love. They practice Sunday nights and perform three to four times a year locally in Addison, Allen, Dallas, and Fairview.

“It’s fun — we love it!” she says. “Music is an outside hobby for all of us.”

From Duran Duran and U2 to Pet Shop Boys and the Go-Go’s, Tulkit plays it all, even some ’90s hits, too. There’s one rule: It has to be dance music. The group members love music so much, they have even encouraged their children to start their own band.

“Our kids are musicians, too,” Dr. Jain says. “It’s great for them. After all, music is something you can do for your whole life, at any time in your life.”
Paul Hackett, MD, chief of the department of surgery at Methodist Charlton Medical Center, is an outdoorsman at heart. When he’s not working with patients or performing colon and rectal surgeries, Dr. Hackett can be found outside on either a motorcycle or bicycle — wearing the appropriate helmet and protective gear, of course.

An avid motorcyclist since he was young, he’s even tried his hand at dirt biking. Now he either rides on a track, for which he owns a motorcycle dedicated to road race tracks, or spends time on his touring bike, a Ducati 848 Streetfighter. Lately, he’s spent more time on his touring motorcycle.

“I usually ride various parts of the Metroplex,” he says. “But I did take a trip to the Tail of the Dragon at Deals Gap, an 11-mile stretch along the Tennessee and North Carolina border that includes 318 turns. I’d also like to ride to the MotoGP race in Austin. It’s the pinnacle of racing.”

When not on a motorcycle, Dr. Hackett also enjoys riding his bicycle along area trails and roads. Although his recent schedule hasn’t allowed him much time for cycling, in the past, he participated in several spring triathlons, including the Memorial Hermann Ironman 70.3. Off his bike, Dr. Hackett has run the Cowtown Marathon. He has spent time on a number of the Dallas-Fort Worth mountain bike trails, like those at Cedar Hill State Park, Boulder Park, and Big Cedar off Mountain Creek Parkway, to name a few.

For Dr. Hackett, whether on a motorcycle or bicycle, it’s a love for the outdoors and enjoying life. In his words: “I like to have a lot of variety in order for it to stay interesting.”
Expecting the unexpected

Methodist Richardson is ready with specialized care for moms and babies in need
uchi Desai’s Wednesday morning didn’t exactly go as planned. The day started like any other in her 30-week pregnancy, but while getting her 6-year-old son ready for school, normal turned alarming.

“I started seeing blue, green, and yellow flashing lights and was very dizzy,” Ruchi says.

Her mother, who was visiting from India, had Ruchi sit down, while Ruchi’s husband took their son to school. After that, Ruchi’s story sounds surreal. Her eyes rolled back in her head, and her family started praying in earnest. “I remember praying a little and then telling my mother I felt like I was going to be sick,” Ruchi says.

She has only intermittent recollections of what happened next: the phone call to 911, the ambulance ride, delivering her baby via cesarean section, and waking up in the intensive care unit (ICU) at Methodist Richardson Medical Center.

Placed in expert hands

Paramedics took Ruchi to Methodist Richardson, where the emergency department is equipped with a dedicated obstetrics area, or OB/ED for short.

Not long after arriving at the hospital, Ruchi had a seizure, and the ED staff determined that eclampsia — a rare but serious condition that causes seizures during pregnancy — was the issue, even though she’d had no previous symptoms.

“Seizures create the risk of the placenta separating from the uterus, which cuts off the baby’s oxygen supply and can cause hemorrhaging,” says Javine McLaughlin, MD, FACOG, hospitalist team lead on the medical staff at Methodist Richardson. “It’s critical to deliver the baby as quickly as possible in cases like this for both their safety.”

OB/ED nurses, operating room technicians, the anesthesiologist, attending physicians, and labor and delivery nurses all sprang into action.

“It was a full team effort all the way through,” Dr. McLaughlin says. “We treat every case like it’s an emergency, so when it actually is, like this one, we are prepared.”

Care for mother and baby

Baby Anaira entered the world at 2½ pounds, not quite 15 inches long, and less than 30 minutes after the ambulance arrived. She was taken to the hospital’s Level III Neonatal Intensive Care Unit (NICU), where she would spend the next 50 days.
Meanwhile, Ruchi was also in need of intensive care. In the hospital’s ICU, great effort was put into treating her eclampsia, reducing her blood pressure, and helping her recover from her C-section. Of particular concern was some swelling in her brain as a result of the seizure.

“I experienced some vision problems and some blurriness,” Ruchi says. Fortunately, her husband and mother were present throughout her ordeal, and her doctors reassured her that the symptoms would dissipate.

While Ruchi was recovering, the NICU staff nourished Anaira with donated breast milk from the Mothers’ Milk Bank of North Texas.

The emergency and obstetrics teams at Methodist Richardson sprang into action to save Ruchi Desai and her baby. Watch Ruchi tell her story at youtube.com/MethodistHealthDFW.

The staff took really good care of me,” Ruchi says. “They were very nice, very friendly. Nurses from the ED and ICU came to visit even after I left their areas.”

Baby Anaira remained in the NICU, but now that her mom was on the mend, they could have a few hours each day of “kangaroo time” — skin-to-skin contact — to help with Anaira’s development and strengthen their bond.

Coming home
Ruchi came home a week after her ambulance ride to Methodist Richardson, with her family ecstatically welcoming her back.

Anaira’s homecoming was even more anticipated. She came home at nearly double her birth weight, but she is still dealing with the effects of being a preemie, like reflux, which doctors say should fade over time. In the meantime, Anaira continues to grow, and Ruchi and her family are enjoying having a healthy baby in the house.

“Everyone was telling me how strong I was while I was in the hospital, but Anaira and I would not be here today if it wasn’t for the team at Methodist Richardson,” Ruchi says. “They saved me and my baby.”

“While breast milk is best for almost all infants, it’s especially important to premature infants, as it helps with brain development and decreases the likelihood of intestinal issues,” says Anbu Muthusamy, MD, neonatal and perinatal specialist on the medical staff at Methodist Richardson. “Having access to breast milk through the milk bank was a great help to bridge the gap until Ruchi could provide her own breast milk.”

Methodist Richardson, Methodist Charlton, Methodist Dallas, and Methodist Mansfield Medical Centers are all drop-off sites for breast milk donors. Learn how to become a donor at texasmilkbank.org.

“Everyone was telling me how strong I was while I was in the hospital, but Anaira and I would not be here today if it wasn’t for the team at Methodist Richardson,” Ruchi says. “They saved me and my baby.”
Meet two women who battled and beat breast cancer. Tina Batton and Shawna Rasco share their stories about their experiences and triumphs. Turn to page 20.
Tina Batton breathed a sigh of relief. Her 3-D mammogram showed no signs of breast cancer. The day before, the 61-year-old had been anxious and depressed.

“Please don’t let the cancer come back,” she had prayed, remembering 16 years ago, when she was first diagnosed with breast cancer.

“My mom was a fighter,” Tina says. “She looked on the bright side. She said at least the cancer treatment she received gave her 12 more years.”

A family history of breast cancer
Tina began getting mammograms at the age of 30 because of her family history — her mother and two aunts were diagnosed with the disease. Her mom, who was diagnosed at the age of 60, survived two breast cancer surgeries six years apart, only to succumb to the disease after it spread to her brain. Tina also lost two friends diagnosed in the advanced stages of the disease.

Tina was diagnosed with breast cancer in 2001 at Methodist Charlton Medical Center. Fortunately, the cancer was caught at an early stage. Her treatment consisted of a lumpectomy, radiation, and medication to reduce the risk of the disease returning.

In May, Texas Gov. Greg Abbott signed a law requiring commercial insurance providers to cover 3-D mammography. After a breast cancer diagnosis 16 years ago, Tina Batton is confident that 3-D mammography will be able to detect future abnormalities.

More peace from more accuracy
Now every year, Tina returns to Methodist Charlton to have a mammogram. Doctors want to make sure the scar tissue that shows up on her mammogram at the site of her lumpectomy is not something more serious. This year, she had a 3-D mammogram for the first time.

“There was no difference in the amount of time required or the amount of compression I felt compared to a traditional mammogram,” Tina says. And she received her results right away.

“3-D mammograms give patients even more confidence in the results of their screenings,” says David Knight, MD, radiologist on the medical staff at Methodist Charlton. “Recent studies show that one to two additional breast cancers are
All four of Methodist’s main hospitals offer 3-D mammography. Call for your appointment today:
Methodist Charlton:
214-947-5490
Methodist Dallas:
214-947-3441
Methodist Mansfield:
682-622-7210
Methodist Richardson:
469-204-2140.

***

A search for someone who cares

**When Shawna Rasco needed more than cookie-cutter breast cancer treatment, Methodist Richardson was there.**
Once I felt it, I knew,” says Shawna Rasco, looking back to Thanksgiving 2015. The then-34-year-old had been lying on her parents’ sofa after dinner, when she absent-mindedly reached over to her side. She came up short when her fingertips brushed against a lump the size of a ping-pong ball along the side of her right breast.

It wasn’t her first lump — she found one in her left breast in 2005, which turned out to be noncancerous. But it was her last.

Another round with cancer
When Shawna, a teacher in Lubbock, came across the lump, she knew not to take it lightly. She had already beaten cancer once in her life, a two-year battle with acute lymphoblastic leukemia at age 20, which required a bone marrow transplant. The radiation exposure then put her at greater risk for developing cancer later in life, so Shawna wasted no time making an appointment with a breast surgeon — and came up disappointed.

“The surgeon wouldn’t answer my questions or listen to my concerns,” Shawna says. “Other surgeons couldn’t see me for another three months. We spent most of December trying to figure out what to do.

“Cancer had derailed my life and my family’s life completely once before,” she says. “I didn’t have a diagnosis yet, but I was already stressed out and overwhelmed.”

Family members in McKinney suggested she look at Methodist Richardson Medical Center. Jenevieve Hughes, MD, FACS, breast surgical oncologist with the Methodist Richardson Cancer Center, got Shawna in right away.

“We were really impressed because the oncologist, plastic surgeon, radiologist, and Dr. Hughes had already met about me before I ever entered her office,” Shawna says. “They were professional, caring, prepared — and listened.”

A natural approach
A biopsy of the lump revealed that Shawna had infiltrating ductal carcinoma stage I, an early-stage cancer. There were two known tumors, both large (a third tumor was found during surgery). Shawna and her parents sat down with Dr. Hughes to discuss all of the surgical options.

“Not every woman needs a double mastectomy,” Dr. Hughes says. “However, because Shawna’s past radiation exposure could put her at higher risk for another breast cancer in the future, we decided to proceed with a double mastectomy.”

But not just any double mastectomy. Shawna was able to have a skin- and nipple-sparing mastectomy with DIEP flap breast reconstruction.

DIEP (short for deep inferior epigastric perforator) flap involves removing fat tissue from the lower abdomen and using it to reconstruct the breast. After
Early detection is key to beating breast cancer, and routine breast self-exams make that more likely. Doing a monthly breast self-exam does two things. First, it helps you learn what is normal for your breasts. Second, it helps you notice changes in your breasts that much sooner, so you can discuss them with your doctor.

“I recommend women start doing breast self-exams around age 35 or even sooner,” says Tom Johnson, MD, radiologist on the medical staff at Methodist Richardson Medical Center. “Starting before you are of the age to need a mammogram allows you to memorize the way your breasts feel so that you have a baseline of your normal.”

BEFORE YOU BEGIN
• Wait a few days after your menstrual cycle ends to perform the exam.
• Consider doing the exam in the shower. Soap helps create a slippery surface, which is ideal for gliding your fingers over your breasts.

FOLLOW THESE STEPS
1. Place your hand behind your head.
2. Get your opposite hand soapy and begin going over the breast with flat fingers.
   **TIP:** Don’t push too hard with the tips of your fingers; flat fingers roll over the breast more easily than if you’re pushing down hard.
3. Go over one section of the breast at a time, moving in a clockwise motion (12 to 1, 1 to 2, etc.). All breasts have lumps and bumps. This is your chance to learn where yours are.
4. Repeat the steps on the opposite breast.

WHAT TO WATCH FOR
“I tell my patients that if a bump or lump is tender, mobile, and smooth, it’s likely not cancer,” Dr. Johnson says. “You are looking for a bump that is hard, grows larger each month, and isn’t mobile. Those are suspicious signs and could be breast cancer.”

Lumps and bumps are most common in the upper, outer quadrant of the breast. Also, breasts often mirror each other. If you find a lump or bump in one breast, check the same area in the other breast before becoming concerned.

“This simple one-minute exam done routinely could potentially save your life,” Dr. Johnson says. “The best thing women can do for their breast health is make time for regular breast self-exams.”

THE EASIEST TEST YOU’LL EVER TAKE

HOW TO PERFORM A BREAST SELF-EXAM

Dr. Hughes removed the original breast tissue, Frederick Duffy, MD, plastic surgeon on the medical staff at Methodist Richardson, led the immediate breast reconstruction.

“For many women, Shawna included, DIEP flap is appealing,” Dr. Hughes says. “Instead of needing breast implants every 10 years, which would have meant several more procedures over Shawna’s lifetime, you have only one reconstruction. Plus, the new breast is made of your own tissue, so it looks and feels more natural than implants.”

Happier than ever
Shawna had her surgery on Feb. 24, 2016, and thanks to accommodations made by the school where she worked, she was able to return to work by March 28. She didn’t need chemotherapy or radiation.

“Everyone made the experience the best experience you could have,” Shawna says. The PICC line team sang to calm her nerves. Dr. Duffy made her laugh. Dr. Hughes exuded sweetness and comfort. The nurse navigator arranged for free genetic testing. “I needed compassion and people who think outside the box, and I found both.”

Today, Shawna finds joy every day in her students, her family, her boyfriend, and in her new cancer-free life.

“I’m happier,” she says. “The thought of getting sick again was always looming over me. Now I don’t have to worry about breast cancer again.”

>> DO YOU HAVE BREAST IMPLANTS?
If you have breast implants, DIEP flap is still an option for breast reconstruction. To learn more about the Methodist Richardson Cancer Center and the options available to you, visit MethodistHealthSystem.org/RichardsonCancer.

>> KEEP THE DATE
Women should get breast exams each year at their annual well-woman appointments. To find an OB-GYN, go to MethodistHealthSystem.org/FindAPhysician.
For breast health, trust Methodist.

Available at your area Methodist Health System medical center, digital and 3-D mammography delivers faster and more accurate images so you and your doctor know you can trust the results. Trust. Methodist.

- Larger, more detailed digital images
- Image magnification for optimal clarity
- Easier collaboration among specialists

MethodistHealthSystem.org/Mammogram
A NEW ERA IN SURGERY

Dozens of surgical procedures are now available with the minimally invasive da Vinci® Surgical System

The art of surgery is 12,000 years old. Its most primitive ancestor was a procedure called trephination, cutting a small round hole in the head.

Fast-forward to modern day and surgery looks far different. While traditional open procedures, with their larger incisions and longer recoveries, still have their important place in medicine today, the advent of robotics has brought a wider range of options to many operations.

Procedures performed with the da Vinci® Surgical System often offer physicians the dexterity of an open surgery but with even greater precision. From a nearby console, surgeons can zoom in closely on the surgical site with a 3-D view and move the tiny arms of the robot in real time.

The patient benefits are many: decreased risk of infection, less pain and bleeding, and a shorter hospital stay and recovery, to name a few.

At Methodist Health System, we’re proud to make the da Vinci robot available at all four of our main campuses, ensuring our patients have access to dozens of procedures with the robot’s benefits. The next page shows many of the procedures surgeons can do with da Vinci.
UROLOGY
• Nephrectomy — kidney removal.
• Partial nephrectomy.
• Prostatectomy — removal of the prostate.
• Pyeloplasty — removal of an abnormal section of the ureter.

COLORECTAL SURGERY
• Colectomy — removal of part of the colon to treat various colon diseases.
• Colon resection — removal of diseased parts of the colon and reconnection of the healthy parts.
• Diverticulitis resection — removal of diseased parts of the large intestine (sigmoid resection) or rectum (rectal resection).
• Ostomy reversal.
• Rectal cancer resection — removal of cancerous section in the rectum.
• TAMIS (transanal minimally invasive surgery) — removal of a small polyp or tumor in the rectum through the body’s natural opening.

CARDIOTHORACIC SURGERY
• Lung biopsy — removal of a small piece of lung tissue.
• Mediastinal tumor resection — removal of abnormal tissue between the lungs.
• Pulmonary lobectomy — removal of a lobe in the lung with cancerous cells.
• Pulmonary wedge — removal of a small piece (wedge) of diseased tissue in the lung.

“Because of the precision of robotic surgery, we’ve seen patient hospital stays go from as high as 10 days down to only three days for major abdominal surgeries.”
— Anand Lodha, MD, colorectal surgeon, Methodist Dallas Medical Center

“With the da Vinci robot, we can offer a more minimally invasive approach to surgery, which means less pain and faster recovery for our patients.”
— Andrew Standerwick, MD, general and bariatric surgeon, Methodist Mansfield Medical Center

“The da Vinci robot takes the laparoscopic surgical approach to a new level, giving me more flexibility and mobility. In follow-up appointments, my patients say the surgery was much easier than they expected it to be; plus they take fewer pain medications, have had minimal pain, and only have a few small scars. It’s a win for both surgeon and patient.”
— Kevin Niblett, MD, FACS, general surgeon, Methodist Charlton Medical Center
The robot gives me more control over the entire procedure and gives my patients their lives back that much faster. Pretty much all my patients go home the following morning, even with difficult procedures. Instead of a 6- to 8-inch incision, they now have four ¾-inch incisions. They’re driving within a week and back to their full activities in two weeks.

— Wm. Richard Salter, MD, FACOG, OB-GYN, Methodist Richardson Medical Center
Starlene Stringer gave birth to her daughter at Methodist Mansfield and came back for help in an emergency.
LOCAL RADIO STAR CHOOSES METHODIST MANSFIELD AGAIN

S tarlene Stringer’s name has been known to Dallas-Fort Worth listeners for more than 20 years. Raised in North Texas, she is known for her work as a traffic anchor for CBS 11 News (KTVT) — where she survived a helicopter crash while reporting — and today as the morning show co-host on the top-rated Christian radio station, 94.9 KLTY.

When a kitchen knife accident left Starlene with a deep cut on her hand this past February, she chose the hospital that has a special place in her heart — Methodist Mansfield Medical Center.

“I had such a wonderful experience there when I gave birth to my daughter, Reagan, four years ago, I knew they would take care of me again,” Starlene says.

A place for great starts

Starlene first became acquainted with Methodist Mansfield in 2012 when it was time to choose a hospital to deliver her daughter. The first-time mom was feeling overwhelmed and nervous about childbirth and caring for her newborn, but she found resources and confidence after taking nearly all of the childbirth education classes offered at Methodist Mansfield.

“I can’t say enough about how thorough and kind the class instructors were — and how cared-for the doctors and nurses in women’s services made me feel,” Starlene says.

A simple but serious kitchen accident

Fast-forward four years to a pretty typical Sunday morning — until Starlene, who was battling laryngitis, accidentally sliced open her thumb while cutting lemons for a home remedy.

“I rushed to the bathroom to get a Band-Aid, thinking that would help, but there was so much blood from the cut it was crazy,” Starlene says. “My husband was out of town, so when I realized I couldn’t get the bleeding to stop, I called 911 and gave the phone to Reagan because I had lost my voice.”

After assuring the EMS team she would drive herself to the hospital, Starlene remembered a sign she saw at a previous visit to the hospital about QuickER.org. This service allows patients with non-life-threatening emergency issues to check in online for an emergency department (ED) visit. They can then wait in the comfort of their own homes instead of a hospital waiting room until their appointment times. For Starlene, this was particularly convenient with a small child at home.

“[I] was so relieved I didn’t have that long waiting room experience,” Starlene says. “I knew exactly what time I should arrive to get seen quickly.”

COMMUNITY COMMITMENT

“I’ve seen how active Methodist Mansfield is in the community. I’ve run in the hospital’s Run with Heart 5K three times, and last year, I shopped for co-worker gifts at their annual holiday gift boutique, Holly Days, which benefits women’s services at the hospital.”

— Starlene Stringer

GOOD THINGS TO SAY

It was Jessica Nelson, MD, emergency medicine physician on the medical staff at Methodist Mansfield, who stitched up Starlene’s cut that day. Dr. Nelson and the staff were proud to hear Starlene praise them and the hospital when she spoke of her ED experience on the radio a few days later.

“It’s a good thing Starlene came into the emergency department here at the hospital to receive care instead of another facility,” Dr. Nelson says. “You never know how serious something can end up being. With a hospital attached to our emergency department, there is no barrier between you and the care you need.”

For Starlene, the choice will always be Methodist Mansfield.

“Methodist truly seems to care about their patients,” she says. “I have sought care there for many years and always feel as though I received great care to get back on my way.”
Julian Munoz is grateful for the life he has today. He can walk, drive, and even mow his lawn occasionally. Seven years ago, things were very different. A sudden illness had left him paralyzed from the neck down and unable to do anything for himself.

**Brought down by a rare disease**

In June 2010, Julian was an active 57-year-old man, making his living as an auto paint and body technician. “I painted designs on the big tractor-trailer trucks,” he says.

One day without warning, his fingertips went numb and his grip became very weak. He had diarrhea for a week.

“The doctor thought it was food poisoning,” Julian recalls. “He gave me antibiotics and I went home.” The next morning, when Julian got out of bed, he took two steps before his legs gave way and he fell to the floor.

“When I went back to the doctor, he took one look at me and told me to go straight to the Methodist Dallas Medical Center emergency department [ED],” Julian says. By the time the ED physician examined him, Julian was completely paralyzed.

A test of Julian’s spinal fluid revealed that he had Guillain-Barré syndrome (GBS), a rare neurological disorder that attacks the nervous system (see “What Is Guillain-Barré Syndrome?” on page 31).

Julian was hospitalized at Methodist Dallas for two weeks before going home. By then, his weight had dropped from 225 pounds to 170 pounds and he was completely bedridden. The doctor told him that some people can recover from GBS in three to six months. For Julian, that recovery would last six years.
What is Guillain-Barré syndrome?

To this day, Julian Munoz doesn’t know why he contracted Guillain-Barré syndrome (GBS), but he now has a better understanding of what the condition is. Here, Asma Khatoon, MD, chief internal medicine resident at the Methodist Dallas Medical Center Golden Cross Academic Clinic, provides more information on the disorder.

“GBS is a neurological disorder in which the body’s immune system attacks the nervous system,” Dr. Khatoon says. “This is due to a phenomenon called molecular mimicry, which may occur following certain viral or bacterial infections. The immune system may mistakenly make antibodies that attack healthy nerves while fighting the infection.”

GBS is rare and affects only one or two people out of 100,000 per year, and men slightly more than women. While the cause of GBS is unknown, it has been associated with Campylobacter jejuni infection, a common cause of food poisoning, and Epstein-Barr virus infection, or mononucleosis. GBS has also been associated with the Zika virus.

OVERCOMING GBS

In addition to rehabilitation, as Julian received, GBS patients may receive treatments that either remove bad antibodies from the blood or fight bad antibodies with good ones.

“Between 80 to 84 percent of GBS patients are able to walk again on their own or with aids,” Dr. Khatoon says. “Sixty percent fully recover within a year and regain motor function.”

Just before Julian graduated from rehabilitation, he learned how to use the equipment at the Methodist Dallas Folsom Fitness and Rehabilitation Center and began working out on his own several times a week.

“The encouragement from all the therapists at Folsom made me want to work harder,” he says, adding that the staff members went out of their way to help him by paying for his fitness membership and driving him to the fitness center. Around the holidays, Julian likes to show his gratitude by surprising them with cookies.

Still making progress

Julian can drive on his own these days. He walks with the aid of a walker and can take care of his daily needs, but he keeps pushing himself, exercising regularly in a home gym he and his family set up. Looking back, he can see how far he has come with the help of the team at Methodist Dallas. Now he’s determined to continue what they started together.

“Sometimes it’s a struggle, but I don’t let it get me down. I don’t get down and I don’t give up.”

A long road to recovery

At home, Julian’s wife and four children rallied together to care for him. His son, who had recently graduated from high school, delayed his college plans to help take care of his father.

“I felt so bad for him because I know how hard it is to be a caregiver,” Julian says. “I took care of my father when he was sick.”

A huge part of Julian’s recovery was his rehabilitation therapy at the Methodist Dallas outpatient rehabilitation center.

“We focused on exercises that helped Julian regain his strength and ability to stand, walk, and use his arms and legs,” says Jennifer Witt, PT, CLT, physical medicine supervisor at Methodist Dallas. “We retrained him how to walk; climb stairs; maintain his balance; and transfer his body from the wheelchair to his bed, commode, and car.”

That process took years, but Julian kept persevering.

“Julian’s determination made him a model patient,” Witt says. “He used the tools he learned in therapy to adapt and function incredibly well, despite his neurological injury.”

Just before Julian graduated from rehabilitation, he learned how to use the equipment at the Methodist Dallas Folsom Fitness and Rehabilitation Center and began working out on his own several times a week.

“The encouragement from all the therapists at Folsom made me want to work harder,” he says, adding that the staff members went out of their way to help him by paying for his fitness membership and driving him to the fitness center. Around the holidays, Julian likes to show his gratitude by surprising them with cookies.

Still making progress

Julian can drive on his own these days. He walks with the aid of a walker and can take care of his daily needs, but he keeps pushing himself, exercising regularly in a home gym he and his family set up. Looking back, he can see how far he has come with the help of the team at Methodist Dallas. Now he’s determined to continue what they started together.

“Sometimes it’s a struggle, but I don’t let it get me down. I don’t get down and I don’t give up.”

>> Learn more about our neurology services at MethodistHealthSystem.org/Neurology-Neurosurgery.
Swelling, redness, and sometimes painful inflammation occurs naturally as a result of an injury or infection. In fact, inflammation is the body’s way of healing itself. But systemic or chronic inflammation can wreak havoc on a body.

Normal inflammation in response to a cut, sprain, or splinter usually lasts for only a few days as the body works to defend itself from foreign objects and bacteria or attempts to repair damaged tissue.

The cause for concern is when inflammation becomes chronic, or long term.

“Many diseases can develop from chronic inflammation,” explains Jill Waggoner, MD, family medicine physician with Methodist Charlton Medical Group. Some examples are:

- Arthritis
- Asthma
- Cancer
- Chronic obstructive pulmonary disease (COPD)
- Dementia
- Depression
- Heart disease
- Inflammatory bowel syndrome
- Periodontal disease.

FINDING THE REAL PROBLEM
Chronic inflammation may occur for many reasons, but you may be surprised to learn the source, in many instances, is one that’s easily fixed — poor nutrition. A bad diet alone can create inflammation in the body, affecting the blood vessels, tissues, organs, and muscles. Some of the primary culprits include carbohydrates, fried foods, red meats, and bad fats, like trans fats.

Add to that scenario excess weight, increased stress, or a lack of exercise, and inflammation can take a stronghold, creating long-term health issues. For example, elevated blood sugar over time can damage blood vessels and nerves and contribute to diabetes. People with diabetes often experience ulcers that won’t heal or can develop heart or kidney disease.

“It’s a whole systemic process,” Dr. Waggoner says. “There are very few diseases, including cancer, that happen in a vacuum. Everything that happens in your body contributes to that illness or disease, and inflammation can be at the root of the disease.”

TREATING INFLAMMATION
So what’s the best way to treat inflammation? The first course of action recommended is usually an anti-inflammatory drug, like a COX-2 inhibitor, NSAID (nonsteroidal anti-inflammatory drug), or corticosteroid. But to prevent chronic inflammation altogether, Dr. Waggoner suggests exercise and a healthy diet that includes plenty of water, green leafy vegetables, lean meats, and omega-3s, like fish oil.

“People need to understand these are things you can control,” Dr. Waggoner says. “You can control what you eat, how often you exercise, whether you relax, and if you’re doing healthy things overall. It sounds too good to be true, but it isn’t.”
HAVE YOU EVER FELT SO FULL OF JOY YOU THOUGHT YOUR HEART WOULD BURST OR BEEN SO EXCITED YOUR HEART STARTED RACING? PERHAPS YOU’VE HAD YOUR HEART BROKEN. While we understand the emotions of the human heart, most of us know far less about its anatomy, the inner workings and intricate structure — and all the things that can go wrong. Even though you may not know your heart inside and out, the cardiologists at Methodist Health System do. With years of training behind them and some of the latest technology at their fingertips, they put their hearts into helping yours.

KEEP READING TO MEET THREE OF OUR PATIENTS WHOSE HEARTS ARE GOING STRONG THANKS TO THE TEAM AT METHODIST.
Renate Stewart got out of bed on New Year’s Day 2017, ready to cook her weekly meal for the homeless. A few minutes later, her friend heard her yell from the other room. Renate was lying on her back with her eyes open. She couldn’t even blink. When paramedics arrived a short time later, Renate was still unresponsive.

Renate had gone into cardiac arrest, meaning her heart had stopped beating, cutting off the flow of blood and oxygen throughout the body. Paramedics continued resuscitation efforts as she was transported to the emergency department (ED) at Methodist Charlton Medical Center.

“Even after the emergency team revived Ms. Stewart, we only gave her a 50 percent chance for survival,” says Ronald Tanaka, MD, emergency medicine physician on the medical staff at Methodist Charlton. “But prayer changes things,” says Renate, who says she comes from a family of strong faith. “My bishop and family formed a prayer circle in my hospital room, and after they prayed, I wiggled my feet.” It was the first time Renate had moved since she came to the ICU.

On Jan. 7, two days before her 50th birthday, Renate finally awoke. Nurses and her family greeted her with, “Hi, Miracle!” Two weeks later, she was discharged to begin her road to recovery.

Medical experts and miracles
“I don’t remember any of it,” Renate says of her health scare. “But my family told me that the Methodist Charlton staff worked feverishly to save me.”

Renate was transferred to the intensive care unit (ICU), and David Levine, MD, cardiologist on the medical staff at Methodist Charlton, implanted a defibrillator to shock her heart in case of another deadly abnormal rhythm. She was sedated to help keep her comfortable while on the ventilator. The ICU medical team painted a grim picture of recovery. Even if Renate survived, she might be in a vegetative state.

“But prayer changes things,” says Renate, who says she comes from a family of strong faith. “My bishop and family formed a prayer circle in my hospital room, and after they prayed, I wiggled my feet.” It was the first time Renate had moved since she came to the ICU.

On Jan. 7, two days before her 50th birthday, Renate finally awoke. Nurses and her family greeted her with, “Hi, Miracle!” Two weeks later, she was discharged to begin her road to recovery.

Beating the odds
Dr. Tanaka notes that only around 10 percent of people survive cardiac arrest.

“Ms. Stewart had a good outcome due to the fast response of her family and EMS and the critical care she received at Methodist Charlton,” he says. “It was seamless to the patient, but our ED and ICU hospital staff worked as a team. Had any of the pieces not been in place, Ms. Stewart would not have survived.”

Renate does not take those pieces falling into place for granted.

“The staff — oh my goodness — they were wonderful,” she says. “They were excellent.”

When she returned to the hospital to thank the staff, “They told me I’m still their miracle,” Renate says. “They said to see me walking and talking when it didn’t seem possible gives them another outlook on life.”

Renate feels she’s still on this earth because she has work to do. “I tell my testimony pretty much every day to give people hope,” Renate says. “When people tell me it’s good to see me, I tell them it’s good to be seen,” she says. “It’s very good.”

To find a cardiologist on the Methodist Health System medical staff, go to MethodistHealthSystem.org/FindAPhysician.
Renate Stewart prepares a meal for the homeless each week. On Jan. 1, 2017, her good deed was interrupted by cardiac arrest, but Methodist Charlton stepped in to save her life.
It was a murmur that kept getting louder. The sound of blood flowing through Christa Bayson’s heart started taking a bigger toll on her daily life.

“I found out I had a heart murmur 15 years ago,” she says. “My blood pressure was going up, so my cardiologist told me that we needed to watch the [mitral] valve. I was good for the first five years, then I trailed off going to the doctor until it got urgent.”

A safer fix for a broken heart
Christa, 45, works as a reading interventionist and instructional coach for Dallas ISD’s Whitney M. Young Jr. Elementary School. She’s also pursuing a master’s degree in leadership. She had never had major symptoms of a chronic heart condition like swelling or shortness of breath. But last fall, she says she felt more tired and dizzy, and that’s when her cardiologist, Archana Srivastava, MD, on the medical staff at Methodist Charlton Medical Center, performed a diagnostic procedure to check Christa’s heart muscle and valve strength.

The test showed blood leaking backward through the mitral valve each time the left ventricle contracted — a condition called mitral valve prolapse. Dr. Srivastava referred Christa to Dan Meyer, MD, FACS, thoracic surgeon and medical director of heart, lung, and vascular services for Methodist Health System. Dr. Meyer is one of only a few surgeons in Dallas-Fort Worth repairing valves like Christa’s through the tiniest of incisions.

“Roughly 15 percent of women have mitral valve prolapse, but many
have no symptoms,” Dr. Meyer says. “Christa’s symptoms were a sign that her leakage was too severe not to fix.

“Especially in a younger patient like Christa, a minimally invasive repair was a much better option than a traditional open procedure,” Dr. Meyer adds. “It poses less risk, damages less heart tissue, and allows for a shorter recovery.”

Christa and her husband, who teaches biomedical pathways for Dallas ISD, went home and immediately started researching minimally invasive valve repair options. Dr. Meyer answered all of their questions and explained everything in detail several times so they would understand the surgery and recovery.

Moving forward with a healthier heart
On Nov. 14, 2016, at Methodist Dallas Medical Center, Dr. Meyer made a small incision in Christa’s right side between her ribs, and using long instruments, worked his way into the heart to repair the weak valve.

Within days, Christa was walking, and weeks later, driving. She spent her winter break recuperating and started back at the library in January. Christa has a daughter at Texas A&M University and a son at Duncanville High School, and she says both helped nurse her back to health.

“I still have a little pain, but now I have more energy, and I’m really watching my blood pressure, taking my medicine, and improving my diet,” she says. “I was half-exercising before, but I’m walking a 5K almost every evening with my husband. I also shared my story at church and was able to talk to a fellow congregation member about having the procedure done with Dr. Meyer at Methodist, and she and I plan to participate in the American Heart Association’s Heart Walk 5K this year together.”

HERE FOR HEARTS IN TROUBLE
Methodist Health System has services to care for your heart, from diagnosis through recovery, and offers minimally invasive treatment options. Learn more at MethodistHealthSystem.org/Heart.
Hidden heart disease

Tom Cox never suspected that he was in need of open heart surgery.
A mile-and-a-half walk home from dinner, all uphill, in Washington, D.C., was a wake-up call for Tom Cox. He and his wife, Karen, were enjoying their East Coast trip in late March for a National League of Cities conference until that walk, when Tom felt like his chest was caving in.

“Dear God, please just let me get home," Tom recalls praying. “I don’t want to go into the hospital here. Please let me get home and I will make a doctor appointment first thing.” When Tom got back to Grand Prairie, where he lives and has worked as deputy city manager for the past 17 years, he immediately saw his primary care provider, who referred him to interventional cardiologist Levi A. Rice Jr., DO, MBA, on the medical staff at Methodist Mansfield Medical Center.

That appointment uncovered a scary truth: Tom had five arteries with 80 to 95 percent blockages.

“I’m excited to be alive,” he says. “That could have been it. Knowing what I know now, I probably should have called 911 when I was in D.C., and if it had gotten any worse, I would have.”

Tom’s physician sent him directly to Methodist Mansfield, where he spent the next nine days in the intensive care unit.

Repairing a damaged heart

Darien Bradford, MD, cardiac surgeon on the medical staff at Methodist Mansfield, performed a 5½-hour open heart surgery on Tom the second day of his hospital stay.

“Tom is the epitome of health for a guy his age,” Dr. Bradford says. “But a lot of times, heart diseases go unnoticed. People think, ‘Oh I’m getting older. I’m just getting more tired.’” In Tom’s case, the heart issues were most likely genetic more than anything else.

The plan was for Dr. Bradford to perform coronary artery bypass grafting (CABG). CABG involves taking part of a healthy artery from elsewhere in the body and connecting it to a blocked artery to go around the blockage. This forms a new route for blood to flow to the heart.

Dr. Bradford performed the surgery off-pump, meaning the heart remained beating throughout the entire surgery. It’s a specialized approach to open heart surgery that, he says, only about one-third of surgeons do. The surgeon can witness the CABG’s effect on the heart muscle almost immediately, and all in all, it makes for an easier recovery for the patient.

Giving it all

Before the surgery, Dr. Bradford and the nurses explained exactly what was going to happen so that Tom would feel comfortable. Tom is no stranger to surgery, though. He’s had a procedure on his shoulder, an appendectomy, plastic surgery following a car accident, and both knees replaced. He says that the best treatment he’s ever had was at Methodist Mansfield.

“You expect a doctor to do a good job, but you don’t expect everyone to treat you just like family,” Tom says. Tom, who serves on the Methodist Mansfield Advisory Board, was not only a fan of his care at the hospital, but he was also campaigning to be “Patient of the Year.”

“You couldn’t ask for a better patient,” Dr. Bradford says. “His attitude was very positive, even though he was going through a pretty stressful situation.”

An extra measure for safety

After about five weeks of recovery, Dr. Bradford and Tom decided to put in a pacemaker. This is not a routine procedure following open heart surgery, but Dr. Bradford noted some irregularities that they both agreed should be handled.

Pacemakers are recommended when the heart’s chambers aren’t correctly working together (e.g., the top chambers will beat, but the bottom ones won’t) or if the heart is beating too slowly, which was the case for Tom. The pacemaker acts as somewhat of a backup mechanism to correct both of these irregularities.

As he prepared for his second heart surgery in two months, Tom realized he didn’t have nearly as much angst as he had about the first procedure. Methodist Mansfield had won his confidence.

After rehabilitation, and with a healthy heart, Tom can do the things he loves with those he loves. He is a grandfather of eight, and one of his favorite activities is taking the grandkids dove hunting.

“It’s really fun to have grandkids one-on-one out there,” Tom says. “They leave their phones behind, so you really get to talk to them.” •

>> Watch Tom Cox tell his story at youtube.com/MethodistHealthDFW.

>> HOW’S YOUR HEART?

Take our heart health risk assessment at MethodistHealthSystem.org/Heart.
When you choose a hospital or doctor, you’re choosing to trust — in expertise, in quality, in a healthier future. At Methodist Health System, we value your trust. It’s why we’re always refining and innovating care, determined to improve our performance and your safety.

“We are intentional about how we approach improvement,” says Valerie Craig, vice president of clinical effectiveness and patient safety at Methodist. Since Methodist began its collaboration with the Mayo Clinic Care Network in 2014, Methodist’s Project Deployment Office team, overseen by Craig, has worked closely with Mayo Clinic professionals to create strategies to make great care even better.

“In many cases, we initiate small tests of change at one campus, and when we see the improvements we’re striving for, we spread those changes to other campuses,” she says. “At other times, we initiate improvements through a collaborative systemwide effort and advance change collectively.”

Here is a brief look at two ways her team is helping Methodist not only earn your trust but also keep it.

**More than 170 lives saved from sepsis**
One of the greatest risks to a patient with an infection is developing a syndrome called sepsis. Undetected, it can escalate to septic shock, affecting brain, heart, and kidney function, and even lead to death.

It’s nothing to take lightly — and we don’t.

A few years ago, we realized that more than 80 percent of our patients diagnosed with sepsis were already showing signs of the disease when they arrived in the emergency department. With the help of Mayo Clinic professionals, we developed an action plan to identify signs of sepsis earlier and standardize care across the health system.

Since implementing that plan, Methodist has seen more than 170 lives saved, and every day that number grows.

**Patient falls almost eliminated**
One-third of patient falls in a hospital are preventable, so a couple years ago, we began a pilot program at Methodist Mansfield Medical Center to protect patients by reducing the number of falls.

The program began with a visit from Mayo Clinic in 2016, when their team evaluated the hospital and helped us develop several best practices. For example, Patient and Family Partnership Agreements help to ensure patients and families know their role in preventing falls. We also developed a video to share with patients about some of the greatest fall risk factors.

Methodist Mansfield quickly became ranked in the top quartile in the nation for the low number of falls documented, equating to fewer than 1 fall per 1,000 patient days. The program was so successful that in October 2016, it was implemented at all Methodist hospitals.

>> EXCELLENCE YOU CAN TRUST
Learn more about the ways Methodist is pursuing excellence at MethodistHealthSystem.org/Awards.
For faster recovery and less pain, trust Methodist.

If you suffer from joint pain, you’re probably looking forward to the freedom and relief that come from a new joint. That’s why Methodist Health System offers the Joint Academy, a free educational workshop to prepare patients both mentally and physically for joint replacement surgery. Thanks to the Joint Academy, our patients can have the best possible recovery. Trust. Methodist.

For more information, go to MethodistHealthSystem.org/JointAcademy
For years, the Methodist Brain and Spine Institute has been changing and saving lives at Methodist Dallas Medical Center. A couple years ago, they brought that care to Methodist Mansfield Medical Center, and now it has reached a level that will make a world of difference for families in our community.

**Advanced equipment and technology**

One of the newest additions at Methodist Mansfield is equipment that can provide enhanced precision.

“Our new stealth image guidance system is effectively a GPS for the brain,” says Richard Meyrat, MD, FAANS, director of stroke and neurosurgery at Methodist Brain and Spine Institute.

Many of the advanced brain procedures at Methodist Mansfield are done via craniotomy. This involves removing part of the skull to create a pathway for the surgeon to operate.

“Now with the stealth system, the neurosurgeon is guided to the most precise location in an area of interest, like to a tumor,” Dr. Meyrat continues.

“By being able to locate these areas with such detail, neurosurgeons have a much clearer map to where they need to operate. That’s something that was significantly more difficult before.”

**Getting a sharper focus**

With the stealth image guidance system, technologically advanced brain and spine procedures can now be performed with smaller incisions, the utmost precision, and without harming any vital structure of the brain.

“We also use a piece of equipment called the O-Arm® that allows surgeons to obtain CT images within the operating room,” Dr. Meyrat says.

“The O-Arm works as a scanner that provides the real-time information surgeons need to navigate along the spine. It helps our surgeons create smaller, more targeted incisions, which often lead to quicker recovery times and shorter hospital stays. In many cases, patients go home the same day.”

Overall, these new technologies allow physicians at Methodist Mansfield to perform more medically advanced procedures in an even safer way.

**Specialized operating rooms**

In addition to advanced equipment, a brand-new specialized operating room gives trauma patients an immediate place to be cared for.

“When it comes to trauma, time is of the essence,” says Nimesh Patel, MD, FAANS, neurosurgeon with the Brain and Spine Institute. “Our new operating room allows us to take the most critical patients immediately. Within this one room we can house all the technology, like the O-Arm and the stealth image guidance system, making it a place that is equipped to administer the highest levels of care.

“For example, we can now effectively care for our emergency patients locally, whereas before they may have been flown elsewhere.”

**More quality care, shorter travel times**

Being close to home for treatment, no matter how major or minor, makes a huge difference to patients and their loved ones. And though the quality of care has always been there at Methodist Mansfield, having new technology and operating rooms makes the necessary treatments that much easier and faster.●
CONVENIENT BRAIN AND SPINE CARE

Methodist Brain and Spine Institute is proud to serve patients at all of Methodist Health System’s main hospital campuses. Learn more about their services at MethodistBrainAndSpine.com.
Living out our mission

Methodist Richardson honored for contribution to education

Methodist Richardson Medical Center was honored to receive the Richardson ISD Excellence in Education Foundation Leadership Award for the unique partnership the hospital has established with the school district.

Under the direction of President Ken Hutchenerider Jr., FACHE, Methodist Richardson donated 7,000 square feet of hospital space at the Methodist Richardson – Campus for Continuing Care to the district’s Health Science Academy. Richardson ISD is now the only district in the country where students in the classroom are learning in an actual hospital setting. The additional space has enabled the program to expand to accommodate as many as 600 students this fall. Methodist Richardson received the Leadership Award at the annual Excellence in Education Foundation gala.

THE CROWD WENT WILD FOR WILDFLOWER! The threat of possible thunderstorms didn’t turn away huge crowds at this year’s Wildflower! Arts & Music Festival. Methodist Richardson was proud to sponsor the 25th annual festival, held in Galatyn Park from May 19 to 21. Featured bands included The B-52s, Night Ranger, and Lynyrd Skynyrd on the Methodist Richardson Amphitheater Stage.

CELEBRATING OUR TINIEST PATIENTS: On Saturday, June 3, the smallest patients born at Methodist Dallas Medical Center returned for a special party in the hospital’s Hitt Auditorium. The annual Superheroes and Princesses preemie party featured a petting zoo, pony carousel, balloon artist, and face painting. Methodist Dallas caregivers and families look forward to the event so they can celebrate the children’s milestones and reunite with these special patients and their families.

BEING MORTAL: Death is something we will all face one day, but discussing it is hard, even for doctors. The award-winning Frontline documentary Being Mortal follows a doctor and his patients as they navigate the final chapters of their lives with confidence, direction, and purpose. This movie and its theme were the topic of Methodist Generations’ latest Boomer U event on Friday, June 23, in Methodist Dallas’ Hitt Auditorium. The movie was followed by a panel discussion on patient end-of-life options and how each individual’s wishes can be communicated to others.
THANK YOU TO OUR FIRST RESPONDERS: Methodist Charlton Medical Center, in partnership with the DeSoto Chamber of Commerce, hosted the city’s third First Responders Appreciation luncheon on Thursday, May 18, in the Methodist Charlton Auditorium. The program included words of appreciation from President Fran Laukaitis, MHA, BSN, RN, FACHE, and a presentation by Emergency Department Medical Director Jeffery Butterfield, MD, along with individual recognitions and photo opportunities.

HERE FOR YOUR HEALTH: On Thursday, April 27, Methodist Charlton’s Adam Martinez, LMSW (left), and Alicia Bell, LMSW (center), represented the hospital at the Mountain View College wellness fair, sharing information about healthy eating, diabetes, and when to go to an emergency department instead of an urgent care clinic. Methodist Charlton Women’s Imaging registered mammography technologist and community outreach liaison, Lynn Authier, ARRT, RT(R)(M) (right), was also present and provided information on breast health and 3-D mammography.

EDUCATION AMBASSADOR OF THE YEAR! Methodist Mansfield President John Phillips, FACHE, was honored in May as Education Ambassador of the Year by the Mansfield ISD. The award recognizes him for going above and beyond to promote Mansfield ISD, actively support district initiatives, and consistently demonstrate exemplary performance and dedicated service to the school district. Phillips (center) is shown here with his family and Mansfield ISD Superintendent Jim Vaszuskas, EdD (left).

KEEPING ATHLETES HEALTHY: This spring, physicians and staff members at Methodist Mansfield Medical Center volunteered to conduct 1,033 sports physicals and 195 echocardiograms for student athletes in the Mansfield and Midlothian ISDs. The sports physicals provided an opportunity for athletes in the school districts to receive a quality physical exam.
“So that they might have life ...” was the mission, and Oak Cliff was the community. What began as an idea from a progressive-thinking Methodist minister in 1920 led to the creation of a 100-bed hospital that opened on Christmas Eve 1927 with a construction and equipment cost of $552,267.

Now for 90 years, patients have trusted Methodist Health System to improve and save lives. In that time, Methodist Hospital of Dallas — now known as Methodist Dallas Medical Center — has undergone many physical, clinical, and administrative changes. It once aimed to serve the population south of Dallas’ Trinity River, but as the city grew, so did Methodist’s reach. In 1975, Methodist Charlton Hospital — now Methodist Charlton Medical Center — opened in southern Dallas County, and for three decades, Methodist was solely a Dallas County hospital system. In 2006, that changed with the opening of Methodist Mansfield Medical Center in Tarrant County.

North Texas continued growing in every direction as businesses and families moved here. Methodist answered the need for more access to care in those communities by opening its first Methodist Family Health Center in South Grand Prairie in 1995 and then adding more facilities in the early 2000s. In 2011, Richardson Regional Hospital was sold to Methodist, and three years later the new $120 million Methodist Richardson Medical Center opened in Collin County. Since then, we’ve added more Methodist Family Health Centers and Medical Groups, as well as Methodist Urgent Care clinics, and we became the first health system in Texas to be a part of the prestigious Mayo Clinic Care Network, bringing world-class care close to home.

At Methodist, we never forget who we serve: our patients, our communities, and each other. As part of this yearlong celebration, employees at all four hospital campuses are serving their communities. They’re making Easter baskets and reading books to at-risk youth, cleaning up parks, and repairing homes for those with physical disabilities, to name a few.

>>However Methodist has touched your life, we would like to hear about it. Please email your stories, photos, and memories to us at methodistmemories@mhd.com.
We’re in your neighborhood

Medical Centers

- Methodist Richardson Medical Center
  2833 E. President George Bush Highway (at Renner Road)
  Richardson, TX 75082
  469-204-1000
  Mothers’ Milk Bank of North Texas drop-off site

- Methodist Richardson Medical Center – Campus for Continuing Care
  401 W. Campbell Road
  Richardson, TX 75080
  469-204-1000

- Methodist McKinney Hospital
  8000 W. Eldorado Parkway
  McKinney, TX 75070
  972-569-2700

- Methodist Hospital for Surgery
  17101 Dallas Parkway
  Addison, TX 75001
  469-248-3900

Methodist Family Health Centers and Medical Groups

1. Richardson Family Medical Group
   399 W. Campbell Road, Suite 101
   Richardson, TX 75080
   972-238-1848

2. Richardson Medical Group
   2821 E. President George Bush Highway, Suite 103
   Richardson, TX 75082
   972-792-7300

3. First Aid Family Care
   613 S. Highway 78, Suite 200
   Wylie, TX 75098
   972-941-8700

4. Richardson Health Center
   820 W. Arapaho Road, Suite 200
   Richardson, TX 75080
   972-498-4500

5. Firewheel
   4430 Lavon Drive, Suite 350
   Garland, TX 75040
   972-530-8590

6. Murphy
   170 E. FM 544, Suite 112
   Murphy, TX 75094
   972-722-6600
Grab your wildest hat and join us for our annual Mad Hatter Tea Party, celebrating breast cancer fighters and survivors!

**Join us!**
Saturday, September 30
10:30 a.m. to 1 p.m.
Methodist Richardson Medical Center
2831 E. President George Bush Highway
Richardson, TX 75082

The event is free, but online registration is required. Info.MethodistHealthSystem.org/Tea-Party-Registration