

THE PULSE

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HOSPITALISTS PROVIDE COMPLETE CARE

Southwest Regional Medical Center recently welcomed Arpita Basu, MD, MPH, as a full-time hospitalist. Dr. Basu joins Jami Diamond Boris, MD, and Amber Grim, CRNP, on the hospitalist treatment team.

A hospitalist specializes in caring for patients in the hospital. Across the country, hospitalists have emerged as the leading level of care for patients admitted to hospitals. They are in the hospital all day and can be available to plan testing and answer questions in a timely manner.

"We are happy to welcome Dr. Basu to the hospitalist family, as we have seen a large growth in the program," says Dr. Boris, coordinator of hospitalist services. "Dr. Basu is highly trained and brings a sincere warmth and dedication to the hospitalist program. I know our patients will relate very easily to her."

Dr. Basu completed medical school in India, followed by a residency at Tufts University. She received her master's in public health from the University of Pennsylvania.

"I chose Southwest Regional Medical Center because I enjoy practicing acute medicine," Dr. Basu says. "I like the exposure to many different aspects of medicine and knowing that each day is a new adventure. I look forward to working with Dr. Boris, Amber and the entire



HERE TO HELP: Members of the hospitalist team at Southwest Regional are (from left) Arpita Basu, MD, MPH; Jami Diamond Boris, MD, coordinator of hospitalist services; and Amber Grim, CRNP.

Southwest Regional team."

Amber Grim, CRNP, is also an integral part of the hospitalist program. She helps coordinate testing and provides another level of accessibility for patients. Grim was born and raised in Greene County.

"It is great to help serve patients at my hometown hospital," Grim says. "It is the goal of the hospitalist team to provide reassurance and comfort to everyone we see."

The philosophy of using a hospitalist originated in response to the nationwide shortage of primary care physicians. Hospitalists allow primary care physicians to spend more time in the office setting with fewer delays and interruptions. In turn, a full-time hospitalist is able to coordinate patient care, answer questions, and facilitate recovery and discharge. The hospitalist communicates regularly with a patient's primary care

physician to understand past medical history. Many hospitals are now using hospitalists to better coordinate care and enhance communication with patients, primary care physicians, specialists and family members.

"We consider our role as an extension of the primary care physician until such time as a patient can return to the office setting to manage their care," Dr. Boris says.

The hospitalist program recently implemented computerized physician order entry (CPOE). This is a step toward using an electronic medical record, which will ultimately lead to a completely paperless chart. Electronic medical records help to reduce errors and streamline patient care.

For more information about the hospitalist program at Southwest Regional Medical Center, visit www.sw-rmc.com.

WELCOME, DR. MOVASSAGHI Neurology coverage now available at SRMC full time

Southwest Regional Medical Center and the SRMC Healthcare Group are pleased to welcome neurologist Babak Movassaghi, MD. He is now providing full-time neurological services in Waynesburg.

Dr. Movassaghi earned his medical degree at Ross University School of Medicine and completed his neurology residency and fellowship at West Virginia University Hospitals. He specializes in diagnosing and

treating Alzheimer's disease, Parkinson's disease, dementia, seizures, traumatic brain injury, headaches, stroke and neuromuscular disease. He also offers electromyography (EMG) testing, which provides information about the extent and location of nerve or muscle injury.

"It's great to be part of a medical staff who are so engaged and committed to serving residents of the community," Dr. Movassaghi says. "I look forward to serving residents of the region."

Until the arrival of Dr. Movassaghi, Southwest Regional offered only part-time neurological coverage, with an option for teleneurology during other times.

"Dr. Movassaghi is a great addition to our ever-expanding medical team," says Amy Diamond, MD, Chief of Staff at Southwest Regional. "I believe the addition of full-time neurological coverage will be a tremendous asset for the community."

Dr. Movassaghi sees patients at the Medical Arts Building, 1150 7th St., in Waynesburg. To make an appointment, call 724-627-2336.



Babak Movassaghi, MD

IT'S ALL IN THE DETAILS

Today's imaging techniques help doctors help you

SOMETIMES DOCTORS NEED to see inside the body to help diagnose or treat diseases. Often they can accomplish this without surgery—thanks to modern medical imaging. The following brief descriptions cover some of the most commonly used techniques.

X-ray. This is the oldest and most often used imaging test. The preferred way to diagnose broken bones, x-rays also have many other uses, such as imaging the chest or assessing damage from arthritis.

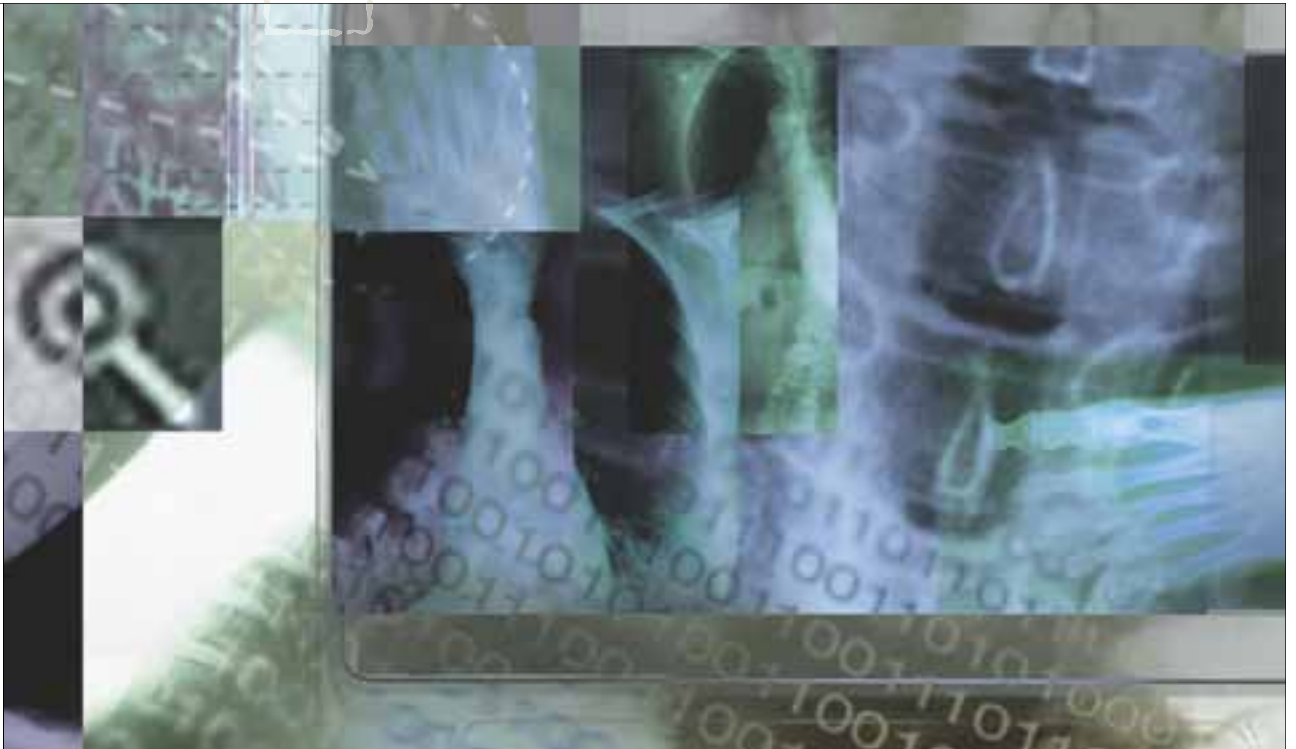
X-rays are a form of radiation that can pass through the body, allowing an image to be recorded on the other side. Bones and other dense tissues absorb the most x-rays and look white; soft tissues appear in shades of gray because more rays pass through them.

Mammogram. A mammogram is a special type of x-ray exam used to image the breasts, often to screen for breast cancer. Mammograms can detect breast tumors early, when treatment has the best chance of success.

Ultrasound. An ultrasound doesn't rely on radiation. Instead, the technique uses sound waves and their echoes to create pictures that can provide, among other things, a breathtaking first look at a growing fetus.

Ultrasound is also used to view internal organs, since it is very good at imaging soft tissues, and to guide biopsy tests. Doppler ultrasound can track blood flowing through vessels and is used to detect narrowing in leg or neck arteries.

CT. Computed tomography scanning uses x-rays and a computer to create cross-sectional images of organs,



CONSISTENTLY IMPROVING: According to a 2010 community perception survey open to all Greene County residents, 91 percent of respondents would prefer to use Southwest Regional Medical Center for outpatient testing, compared to just 22 percent in 2006.

blood vessels and other types of tissue in great detail. For example, CT can show fibrous tissue in organs and other details that aren't visible with regular x-ray exams.

Multiple x-ray beams are sent through the body at different angles, producing thin images, or slices, that are assembled by a computer and viewed on a monitor.

CT is often used to get views of the head, abdominal organs or the pelvis. It can help detect cancer, spinal injuries and other conditions.

MRI. Magnetic resonance imaging also captures detailed cross-sectional images, but with a strong magnetic field and radio waves instead of x-rays.

While MRI can be used to view almost any part of the internal structures of the body, some of the more common uses are to view the brain and the spinal cord to evaluate back pain.

PET. Positron emission tomography scans can reveal details about the chemical activity of organs, so doctors can see how well they are functioning. These images are taken by detecting the energy from particles released by a short-lasting radioactive substance put inside the body.

PET scans can help doctors detect cancer, monitor its treatment, or study the heart or the brain.

ADVANCING AND EXPANDING Keep in mind that these imaging techniques have many more uses.

As technology advances, the ways in which imaging is used to diagnose and help treat conditions are expanding all the time. Read below for more information about scheduling a procedure.

Sources: American College of Physicians; American College of Radiology; Radiological Society of North America

HIPAA—OUR COMMITMENT TO YOUR PRIVACY

INFORMATION ABOUT YOUR HEALTH is deeply personal, and we work diligently to protect it. Guarding these sensitive details about your life is our policy and practice. It's also the law.

The federal Health Insurance Portability and Accountability Act—often simply called HIPAA—is the federal law that gives you rights over your records. It applies to most doctors, nurses, pharmacists, and many other providers and programs, as well as to hospitals, health plans, Medicare and Medicaid.

Because of HIPAA, you can:

- Ask to see and, for a reasonable fee, get a copy of your health records. This is true even if you haven't paid your bill.
- Add corrections to your health records.
- Request that certain people or providers not be given information about your health or treatment.
- Decide if you want to allow your health information to be used for certain purposes, such as marketing.
- Get a report on when and why your information was shared or used.
- File a complaint if you think your rights or privacy have been violated.

HIPAA spells out other rights too. For example, it allows you to ask to be contacted somewhere other than at

home—for instance, you can ask to get test results at work.

WHY WE MIGHT SHARE RECORDS There are some good—and approved—reasons to use or share patient information. We may need it:

- To comply with laws, such as reporting influenza and other public health risks.
- For coordinating your treatment and care.
- To pay providers.
- For analyzing the quality of treatment, providers and institutions.

But remember: Your health information cannot be used or shared without your written permission, unless HIPAA allows it.

Federal law protects your right to keep your private health information private, no matter what form it's in.

ALWAYS VIGILANT Protecting your private medical information is of great importance to us, just as it is to you. We're prepared to answer any questions you might have about your rights or about our responsibilities and safeguards. Just call us at 724-627-2445.

One call can do it all: SRMC Direct Access

724-627-2393

SRMC Direct Access is your one call to streamline all hospital appointments and procedures while reducing medical errors. Our specially trained staff are here to help you with:

- Appointment scheduling for cardiology, diagnostic imaging and surgical services.
- Pre-registration—to verify your information and reduce your wait time upon arrival.
- Insurance authorization and verification—to discuss your coverage and receive proper approvals from your insurance company.
- Pre-procedure testing questions—What's on your mind?

When you arrive on the day of your test, go right to the Express Check-in desk to finish your registration process quickly and without hassle!

Available Monday through Friday, 7 a.m. to 5 p.m.

COMMON LAB TESTS: WHAT YOU NEED TO KNOW

If you've ever rolled up your sleeve to have blood drawn or opened your mouth to have your throat swabbed, you've had a lab test. ♦ Doctors use these tests—which require samples of blood, urine or body tissues—for several different reasons. A key one is to diagnose diseases before they produce signs or symptoms. Your doctor might also order a lab test to plan your treatment for a disease that's already been diagnosed or to be sure a current treatment is working. ♦ The chart that follows can help you better understand five common lab tests.



Test	Preparation	What's tested	How it's done	Why it's ordered
Complete blood count (CBC)	None.	A CBC provides detailed information about three types of cells in your blood: red blood cells, white blood cells and platelets.	Blood is drawn from a vein in your arm.	A CBC test helps detect blood diseases and disorders, such as anemia, infections, clotting problems and blood cancers. If you're having signs or symptoms such as fatigue, weakness, bleeding or bruising, your doctor may order this test to find out why. It can also be used to monitor diseases and drug treatments such as chemotherapy.
A1C test	None.	Your average blood sugar level for the past two to three months.	Blood is drawn from a vein in your arm or by puncturing the skin on a fingertip.	If you have diabetes, an A1C test can tell you how well your blood sugar is controlled—in other words, if your treatment plan is working. It can also be used to diagnose prediabetes (a condition in which blood sugar is higher than normal but not high enough to be diabetes) and diabetes.
Urinalysis	Follow any instructions for producing a clean-catch urine sample.	A urinalysis checks your urine for abnormalities, such as elevated levels of protein, red blood cells or bacteria.	A urine sample is collected in a container.	A urinalysis may be done as part of a wellness exam, a new pregnancy evaluation or a workup for planned surgery. Chances are your doctor will also order one if he or she suspects a problem in your urinary system, such as a urinary tract infection or kidney disease.
Comprehensive metabolic panel (CMP)	Fasting for 10 to 12 hours before a CMP is often required. Ask your doctor.	This group of 14 tests measures different chemicals in your blood. It's usually done on the fluid (plasma) part of blood. A CMP includes tests that check blood sugar, calcium and electrolytes (minerals that help maintain fluid levels). It also includes tests that measure kidney function.	Blood is drawn from a vein in your arm.	Your doctor may order a CMP as a blood workup for a yearly physical. It can reveal important information about your muscles (including your heart), bones, kidney and liver and check for diseases such as diabetes. It can also monitor conditions that are already diagnosed, such as high blood pressure.
Lipoprotein, or lipid, panel	Fasting 9 to 12 hours before this test is required.	This group of tests measures your total cholesterol, LDL (bad cholesterol), HDL (good cholesterol) and triglycerides (a type of fat in your blood).	Blood is drawn from a vein in your arm or by puncturing the skin on a fingertip.	A lipid panel helps determine your risk of heart disease. It can also help your doctor determine what treatment may be best for you if you are at high risk of heart disease.

Sources: American Association for Clinical Chemistry; National Institutes of Health

Accuracy starts with you

If a lab test is in your future, you might need to do more than simply show up at the right time. Some tests require special preparation. For example, your doctor might tell you to:

- Fast for several hours, or even overnight, before the test.
- Avoid certain foods or medicine.
- Not smoke or exert yourself too much beforehand.

Whatever instructions you're given, follow them carefully. Your instructions serve a very important purpose: They help ensure accurate test results. Any deviation from them may affect the results, which might delay a diagnosis or even lead to a wrong one if your lab test was ordered to get to the bottom of a medical problem.

And if for some reason you weren't able to follow the instructions to the letter, alert the person who collects your sample—and explain exactly what you did or didn't do. Also:

- If you're ever unclear about how you should prepare for a lab test, speak up and ask your doctor for clarification.
- Whenever your doctor orders a lab test, tell him or her about any medicines you take. This information could be important later on if your doctor has any questions about your test results.

Source: American Association for Clinical Chemistry

Your doctor may order a lab test to help plan your treatment or to be sure that a treatment is working.

BE PREPARED



Meet the doctors of the SRMC Healthcare Group

FAMILY PRACTICE

■ Amy Diamond, MD ■ J. Eric Chadwick II, MD
 John P. Martin, DO 102 Carmichaels Plaza
 220 Greene Plaza 724-319-2055
 724-627-8582

GENERAL SURGERY

A.J. Patterson, MD
 Ferdinand Martinez, MD
 112 Walnut Ave., Suite A
 724-627-5474

HEMATOLOGY AND ONCOLOGY

Mudussara Khan, MD
 1st Floor of SRMC
 724-852-2523

INTERNAL MEDICINE

Gaurav Nayyar, MD
 236 Elm Drive, Suite 103
 724-627-5780

NEUROLOGY

Babak Movassaghi, MD
 1150 Seventh St.
 724-627-2336

OBSTETRICS AND GYNECOLOGY

Alexander Meecs, MD, FACOG
 236 Elm Drive, Suite 104
 724-627-3597

PODIATRY

Darlene Saheta, DPM
 220 Greene Plaza
 724-852-2788

PSYCHIATRY

Richard Ajayi, MD
 130 Greene Plaza
 724-627-2756

For a full list of physicians affiliated with Southwest Regional Medical Center, visit www.sw-rmc.com.

SRMC OFFERS HOPE DURING CANCER TREATMENT

WHEN MARY ANN LESSICK began her cancer journey earlier this year, she never imagined she would find a silver lining in her hometown medical center.

Her journey began when Darrell Donley, MD, suggested she have an annual gynecological exam. During her examination with Alexander “Sandor” Meecs, MD, FACOG, they discovered a lump. She then came to the diagnostic imaging center at Southwest Regional Medical Center, where Adam Patton, MD, radiologist, performed a biopsy. He confirmed her fear that it was cancer.

“I felt a peace, that everything was going to turn out all right,” Mary Ann says.

Her next step was to see A.J. Patterson, MD, FACS, a general surgeon, for a mastectomy. She then visited with Mudussara Khan, MD, with the SRMC Hematology and Oncology Center, where she has been receiving chemotherapy treatments since January.

“This is a top-rate facility. No matter where we have gone, we have been directed and guided through the process,” Mary Ann says of the SRMC Hematology and Oncology Center, which is on the first floor of the hospital. “I have such praise for this place. They are all so

professional, yet there is such an atmosphere of home and support. You just don’t feel the weight of what’s going on.

“I can’t thank them all enough. Janice, Melanie, Denise, Gretchen and Dr. Khan have all been there for support.”

Through it all, Mary Ann’s husband, Ray, has also stood firmly by her side.

“We would recommend this hospital to anyone,” Ray says.

When scheduling an appointment, Janice Yoskovich, RN, learned that the Lessicks would be celebrating their 49th wedding anniversary on the day of her treatment. Yoskovich called the nutritional services department, which provided carrot cake and a candle for the couple. After the labs were drawn, the staff presented Mary Ann and Ray with the cake.

“We will remember that for the rest of our lives. It was such a wonderful thing,” says Mary Ann.

The couple live in Carmichaels and have three adult children and two granddaughters.

For more information about the SRMC Hematology and Oncology Center, call **724-852-2523**.



A SWEET SURPRISE: The staff of SRMC Hematology and Oncology Center recently helped Ray and Mary Ann Lessick celebrate their 49th wedding anniversary by surprising them with a carrot cake after one of Mary Ann’s treatments.



STEP UP TO THE PLATE

Good nutrition may require a new approach during cancer treatment

CANCER TREATMENT CAN take a lot out of you. So it’s a good idea to pay careful attention to what goes into you—particularly what you eat.

Good nutrition can help reduce treatment side effects and help you heal more quickly and generally feel better.

The emphasis is on getting a variety of nutrients necessary for good health. However, during treatment, you may encounter challenges to eating well.

The American Cancer Society and The American Institute for Cancer Research offer these suggestions:

Talk with your doctor about possible side effects.

Knowing the difficulties that might lie ahead can help you better deal with them.

For example, if nausea is often a side effect of the chemotherapy drugs you’ll receive, it may be helpful to eat dry foods—such as toast or crackers—when you wake up and every few hours. If radiation to your neck is likely to cause a sore throat, soft foods—such as eggs or mashed potatoes—may be best.

Consider asking your doctor for a referral to a registered dietitian. He or she can help you form an eating plan tailored to your specific nutritional needs.

Be open to new ways of eating. It’s sometimes helpful to change the way you eat. Six small meals, for instance, may be tolerated more easily than three large ones. Or eating your largest meal at breakfast, rather than dinner, may be best if you usually feel better in the morning.

Plan ahead. There may be days when cooking or grocery shopping sounds too tiring. Stocking your home with healthful snacks and frozen meals might make it easier to eat. It’s good to ask for help when you need it too.

DOCTORS WHO DOES WHAT?

A guide to common medical specialists

Let's say that you feel sharp pains in your back. So you call your doctor for an appointment.

Once you're there, he or she asks about your symptoms, gives you a brief physical exam and maybe orders a test. Then your doctor says to you, "I think you should see a nephrologist."

And you say, "A who?"

That's a very good question.

Your doctor is referring you to a specialist—in this case, a kidney specialist. Nephrology is just one of the many areas of expertise that, while recognized by the American Board of Medical Specialties (ABMS), are still a mystery to most of us.

Who are these specialists, and what do they do?

This chart may help explain. It's not a complete list of every specialty and subspecialty for which a doctor can be certified. (There are more than 145.) But it includes some of the most common ones.

For a more comprehensive guide to medical specialties, visit the ABMS website at [www](http://www.certificationmatters.org)

[.certificationmatters.org](http://www.certificationmatters.org).

TYPE OF SPECIALIST	TYPE OF CARE
Cardiologist	Focuses on diagnosing, treating and preventing diseases of the heart and blood vessels. Cardiologists often treat heart attacks, heart failure and heart rhythm disorders.
ENT doctor	Also called an otolaryngologist. Treats disorders of the ears, nose and throat (ENT), as well as related areas of the head and neck.
Family physician	Delivers a wide range of acute, chronic and preventive medical care. Offers routine checkups, immunizations and health management for people of all ages.
Gastroenterologist	An internist who specializes in diseases of the digestive system. May also perform procedures like colonoscopy and endoscopy.
General surgeon	Performs many types of surgery, including those related to critical illness or injury. Frequently treats conditions like appendicitis, hernias and gallstones.
Hospitalist	Manages care of patients in a hospital. May have residency training in internal medicine, pediatrics or family medicine.
Internist	Provides long-term, comprehensive care for both common and complex illnesses for adults.
Nephrologist	An internist who focuses on disorders of the kidney and urinary tract.
Neurologist	Evaluates and treats health issues of the brain, spinal cord and peripheral nerves. Examples include stroke, brain tumors, Parkinson's disease and multiple sclerosis.
Obstetrician/gynecologist	An OB/GYN focuses on women's health—particularly their reproductive systems—before, during and after childbearing years.
Oncologist	An internist who specializes in diagnosing and treating cancer. Subspecialties include surgical and radiation oncology.
Orthopedic surgeon	Performs surgery on the musculoskeletal system, mostly the extremities and spine. Can fix broken bones or replace worn-out joints, such as hips or knees.
Pediatrician	A primary care doctor who specializes in the health and development of children.
Psychiatrist	Evaluates and treats mental and emotional disorders, such as schizophrenia, depression, and addiction or substance abuse.
Pulmonologist	An internist concerned with diseases of the lungs and bronchial tubes, such as pneumonia, emphysema and tuberculosis.
Radiologist	Uses imaging tools like x-rays, CT and ultrasound to diagnose and sometimes treat disease.
Rheumatologist	An internist who focuses on diseases of the joints, muscles, bones and tendons. Examples include arthritis, back pain, gout and lupus.
Urologist	Also called a genitourinary surgeon. Diagnoses and treats disorders of the female and male urinary tract, as well as the male reproductive system.

Additional sources: American Academy of Otolaryngology-Head and Neck Surgery; American College of Cardiology; American College of Physicians; Society of Hospital Medicine

A doctor just for you

You could choose a doctor by throwing a dart at the phone book listings.

Or you could pick a name—any name—from your insurance company's roster of preferred providers.

But medical experts suggest a more methodical approach. After all, a doctor is someone you'll be entrusting with your health. You want to find a doctor who's competent, for sure—but also someone you feel comfortable talking with.

Here are some tips for finding the right doctor for you:

Seek recommendations.

Ask friends, co-workers and, if appropriate, your current doctor for referrals.

Do a little digging. You have a list of names. Call the offices to make sure the doctor takes your insurance. Ask about office hours and after-hours care.

Set up an interview. Visit the office and talk with the doctor face-to-face. Bring a list of topics that are important to you for discussion. (You may need to pay for this meeting.) Some good questions to ask: What hospitals does he or she use? Can someone on staff answer common questions over the phone?

You might also want to find out if you can communicate with the office online to make appointments, schedule tests or refill prescriptions.

There are many talented physicians on staff at Southwest Regional Medical Center (SRMC). Did you know that we have an allergist, an oncologist and a full-time neurologist? Some physicians affiliated with SRMC are employed by the SRMC Healthcare Group, while others practice independently. They are all here to help guide you on your road to good health. Learn more at our online physician directory at www.sw-rmc.com, or call 724-627-2656.

Sources: Agency for Healthcare Research and Quality; American Academy of Family Physicians; American Board of Medical Specialties

HOW TO FIND A PHYSICIAN

Need a doctor? We can help. Call 724-627-2656 or visit our online physician directory at www.sw-rmc.com.

HYPERBARIC OXYGEN THERAPY

HELP FOR A HOST OF HEALTH PROBLEMS

THERE'S A LONG history of treating hospital patients with oxygen. But today, oxygen therapy is not just a tool of lung doctors and respiratory therapists.

A unique type of oxygen treatment known as hyperbaric oxygen therapy (HBOT) is also playing an important role in helping people get well.

HBOT involves breathing in pure oxygen. This happens while you are in a sealed chamber pressurized at up to three times the normal atmospheric pressure.

Under these conditions, oxygen levels in your blood increase while concentrations of nitrogen and carbon monoxide go down. Any gas bubbles in the blood also may decrease in size.

According to the American Medical Association and other experts, HBOT may be helpful for people with:

- Certain types of wounds, injuries and infections,



HELP WITH HEALING: Staff members of the SRMC Wound Care and Hyperbaric Center pause with George Pyle (second from left), the center's first healed patient. They are (from left), Darlene Saheta, DPM; George Pyle; Darla Mylan, RN; Ferdinand Martinez, MD, FACS.

including diabetic wounds of the lower extremities.

- Skin grafts that aren't healing.
- Bones or soft tissue damaged by radiation therapy.
- Bone infection.

RIGHT FOR YOU? HBOT can take place in a chamber built for one person or for several people.

In a single-person chamber, you lie on a padded table that slides into a clear, plastic tube. Then you simply relax and breathe normally. Treatment typically lasts from 1 to 2 hours. Your individual circumstances determine how many treatments are needed.

Some people—including women who are pregnant and people with severe heart failure or certain lung conditions—may not be good candidates for HBOT. And, as with any treatment, complications are possible. This makes discussing the potential benefits and risks of HBOT with your doctor important.

Most health plans and Medicare and Medicaid cover medically approved uses of HBOT.

For more information on wound care or hyperbaric treatment, call Southwest Regional Medical Center's Wound Care and Hyperbaric Center at



LAPAROSCOPIC SURGERY

AN OPTION FOR GYNECOLOGICAL CONDITIONS

MAYBE YOU HAVE a fibroid in your uterus that needs to come out or severe endometriosis that is best treated with a hysterectomy. If you're facing a gynecologic procedure such as these, ask your doctor if laparoscopic surgery is an option.

Among its benefits, this type of surgery is less invasive, less painful and usually requires less recovery time than traditional surgeries, notes the American College of Obstetricians and Gynecologists. Here's how it works:

Laparoscopy allows doctors to do surgery without making large cuts. A small incision in the bellybutton is made so the doctor can insert a laparoscope—a thin, lighted tube with an attached camera.

The camera sends images to a screen so the doctor can see inside the body while performing surgery. A gas (such as carbon dioxide) is used to fill and inflate the abdominal cavity to make the internal organs more visible.

Other small incisions might be needed for instruments the doctor is using. These incisions are usually no longer than half an inch. That means you heal more quickly and have less scarring.

MULTIPLE USES Laparoscopy can be used for many gynecological conditions and procedures. Among them:

- Endometriosis—a condition in which tissue similar to the type that lines the uterus starts growing outside of the uterus. This abnormal growth can cause problems such as fatigue, pain and infertility.

The only way to know for sure you have endometriosis is for a doctor to examine the inside of your pelvis.

Laparoscopy is one way to do this. It can also be used to treat endometriosis. The abnormal tissue is removed with a laser or through the use of heat or other methods.

● Ovarian cysts—fluid-filled sacs in or on the ovaries. They can be found with a physical exam and ultrasound. If the cysts are painful, getting larger or not going away on their own, you may need surgery. Laparoscopy may be an option for removing small cysts.

This type of surgery is less invasive, less painful and usually requires less recovery time than traditional surgeries.

● Fibroids—muscular tumors that can grow in the uterine wall. They are almost never cancerous, but they can grow quite large and cause pain and other problems.

Laparoscopy can help your doctor confirm if you have fibroids. And if your fibroids are causing symptoms,

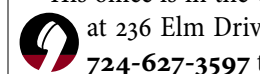
laparoscopy is one option to remove the tumors.

● Hysterectomy—surgery to remove the uterus. It may be used to treat cancer, fibroids, endometriosis and other conditions.

A hysterectomy may be done laparoscopically. In that case, the uterus is removed in small pieces through the incisions. Other times, the uterus is removed through the vagina, but the doctor uses a laparoscope to guide the surgery.

Alexander Mecs, MD, FACOG, is board-certified in obstetrics and gynecology and is a minimally invasive surgery specialist. Dr. Mecs has surgical privileges at Southwest Regional Medical Center and performs many vaginal and laparoscopic procedures. He offers obstetric care, annual gynecological examinations, IUD insertion and primary infertility treatment. He has delivery privileges at St. Clair, Magee and Mercy hospitals.

His office is in the Central Greene Professional Plaza at 236 Elm Drive, Suite 104, in Waynesburg. Call



Ready for recovery

You may be back on your feet in short order after laparoscopic surgery, but you still need to take some precautions, according to the American College of Obstetricians and Gynecologists.

Most of the time, you'll go home the same day as your surgery. But

plan to have someone else do the driving.

Soreness and discomfort are normal, especially around the incisions.

Your throat may also be sore if you had a tube inserted to help you breathe during the surgery. Use lozenges or gargle with warm salt water to ease the ache.

Some pain in your shoulder or

back is also normal. This is from the gas used during the surgery. It should go away within a few days.

Let your doctor know if your pain and nausea don't get better or if they get worse after a few days.

And ask your doctor how soon you can get back to your normal activities.

OUTPATIENT SURGERY

FAST, SAFE AND HELPFUL

WHEN YOU'RE NOT feeling well, often you want to be in the comfort of your own home. And these days, home is where you might find yourself within just a few hours of having outpatient surgery (also called same-day surgery or ambulatory surgery).

According to the American Medical Association, *outpatient surgery* is defined as any surgical procedure in which you're not admitted to a hospital and you get to return home the same day as your surgery.

More than half of the surgeries performed today in the U.S. are done on an outpatient basis, reports the Centers for Disease Control and Prevention.

Many medical advances have paved the way for this trend, including:

- Improvements in anesthesia that allow patients to recover more quickly and with fewer side effects than they did with older types of anesthesia.
- Better post-surgery pain relief options.
- More options for minimally invasive or noninvasive procedures, which make it safer for patients to go home the same day as their surgery.

Procedures that may be done as outpatient surgery include: ● Cataract surgery. ● Gallbladder removal. ● Tonsil removal. ● Hernia and hemorrhoid repair.

These types of outpatient surgeries may be performed in a variety of settings, from hospitals to surgery centers to a doctor's office.

Your doctor will give you specific instructions on how to prepare for your outpatient surgery. In general,

most people are asked not to eat or drink anything after midnight on the night before surgery.

If you take medications, your doctor can tell you whether or not to continue them as usual.

You'll likely be able to go home within a few hours after your surgery. If you were sedated, you'll need someone to drive you home and help take care of you for at least the first 24 hours that you're home.

If you only had local anesthesia with no sedation, you may be able to drive and take care of yourself. Check with your doctor ahead of time.

Call your doctor with any concerns after you're home, and see him or her for a follow-up visit as instructed.

Now get GI care close to home

Southwest Gastroenterology Associates will soon be seeing patients right here in Greene County and will perform many GI procedures at Southwest Regional Medical Center, including colonoscopies.

Southwest Gastroenterology Associates is home to Richard Panicco, DO; Philip Joson, MD; and Mohan Phanse, MD. Their office will be at 236 Elm Drive, Suite 105, in Waynesburg. For more information, call 724-852-1122.

According to a 2010 community perception survey open to all Greene County residents, 92 percent of respondents would prefer to use Southwest Regional for emergency room care, compared to 34 percent in 2006.



HERNIAS: KNOW THE SIGNS

When is a hernia an emergency?

Most hernias don't require immediate medical attention. But if a hernia pinches off the blood supply to your small intestine, you need to seek help right away.

The condition—called a **strangulated**

hernia—must be treated with surgery immediately.

Signs of a **strangulated hernia**

- include: ■ Extreme tenderness and redness near the hernia bulge. ■ Sudden pain that increases rapidly. ■ Fever. ■ Rapid heart rate.

Left untreated, a **strangulated hernia** can cause nausea, vomiting and

severe infection. It can become a life-threatening condition within a matter of hours.

If you notice any signs of a **strangulated hernia**, immediately go to the nearest hospital emergency department.

Sources: American College of Surgeons; Society of American Gastrointestinal and Endoscopic Surgeons

IT'S NOT MUCH fun to think about—a portion of your intestine protruding beneath the skin.

We're talking about a hernia in the groin—it happens.

You can develop a hernia at any age, from infancy through adulthood. And both men and women can get a hernia, although it is more common among men.

Most hernias in adults are caused by heavy strain on the abdominal wall. But aging, injury, an old incision or a weakness present from birth can also cause a hernia.

According to the American College of Surgeons (ACS), factors most likely to cause a hernia include: ● Lifting heavy objects. ● Sudden twists, pulls or muscle strains. ● Weight gain. ● Chronic coughing. ● Straining on the toilet because of constipation.

Along with a visible bulge on one or both sides of your groin, symptoms of a hernia can include: ● Discomfort or sharp pain—especially when lifting or exercising. ● A feeling of weakness or pressure in the groin. ● A burning or gurgling feeling at the bulge.

TREATING A HERNIA A hernia does not get better over time. Nor will it go away. The pain will usually get worse, and the hernia will usually get bigger.

If you can tolerate symptoms of a hernia, your doctor may recommend watchful waiting. But if a hernia is causing you pain and discomfort, you probably will need surgery.

Most hernias in adults are caused by heavy strain on the abdominal wall.

Most hernia operations can be done on an outpatient basis. To repair a hernia, a surgeon may use:

● **Conventional surgery.** The surgeon makes an incision in the groin and pushes the protruding tissue back into the abdominal cavity. The sac that has formed is then removed, and the hole in the abdominal wall is stitched shut. This is the most common type of hernia repair, reports the ACS.

● **Tension-free mesh surgery.** The surgeon makes an incision at the site of the hernia and inserts a piece of mesh to cover the damaged area of the abdominal wall.

● **Laparoscopic surgery.** The surgeon makes several small incisions in the lower abdomen and inserts a laparoscope—a thin tube with a tiny video camera attached to one end. The camera sends images of the hernia and surrounding tissue to a monitor. While viewing the monitor, the surgeon uses instruments to repair the hernia.

It can take up to six weeks to recover from hernia surgery. You'll need to carefully follow your doctor's instructions on such things as bathing, exercising, lifting, having sex and driving.

At Southwest Regional Medical Center, A.J. Patterson, MD, FACS, and Ferdinand Martinez, MD, FACS, are general surgeons specializing in laparoscopic hernia repairs. To schedule a consultation, call 724-627-5474.

Smoking: Get help to quit

So you're kicking around the idea of kicking the habit?

As a means to promote a healthier lifestyle for patients, employees and visitors, Southwest Regional Medical Center recently became a non-smoking campus.

If you are among those who have unsuccessfully tried to quit, do yourself a big favor: Consider trying a stop-smoking aid. According to the National Institutes of Health, some aids could more than double your chance of success.

You might try:

- Nicotine replacement therapy, such as over-the-counter patches, lozenges and gums, or prescription nasal sprays and inhalers. They can ease withdrawal symptoms.
- Non-nicotine prescription drugs to help with withdrawal symptoms.
- Counseling, such as stop-smoking phone lines, classes or support groups.

When you're ready to quit, pick a date and decide on a plan for quitting. Using more than one stop-smoking strategy often works best.

NEW YEAR, NEW YOU

IT'S THE PERFECT TIME TO TRANSFORM YOUR HEALTH FOR THE BETTER

Are you looking to make some positive changes in your life? The coming new year can be a great time to start.

◆ When it comes to your health, the American Cancer Society and other experts have some specific ideas that can help you eat better, stay active and keep illness away.

Consider taking on two or three ideas that make sense for you. Just don't try to do too much at once. Your chances of long-term success are better if you set realistic, measurable and attainable goals. So let's get started.

Fuel your hunger wisely. Go for more vegetables and fruits—and not just at mealtime. Consider snacking on a piece of fruit or some carrot sticks instead of high-calorie vending machine fare. Tip: Fruits and vegetables with the most color are often the most nutritious.

Change your order. In a restaurant, keep portion sizes sensible by ordering an appetizer and salad or soup and skipping the entrée. Or split an entrée with your dinner date.

Stash the saltshaker. If you're getting more than two-thirds of a teaspoon of salt a day from all sources, your sodium intake is too high. Try flavoring your food with herbs and spices instead of salt.

Drop the soda pop. If you're looking to avoid weight gain, limit your consumption of regular soda and other sugary drinks.

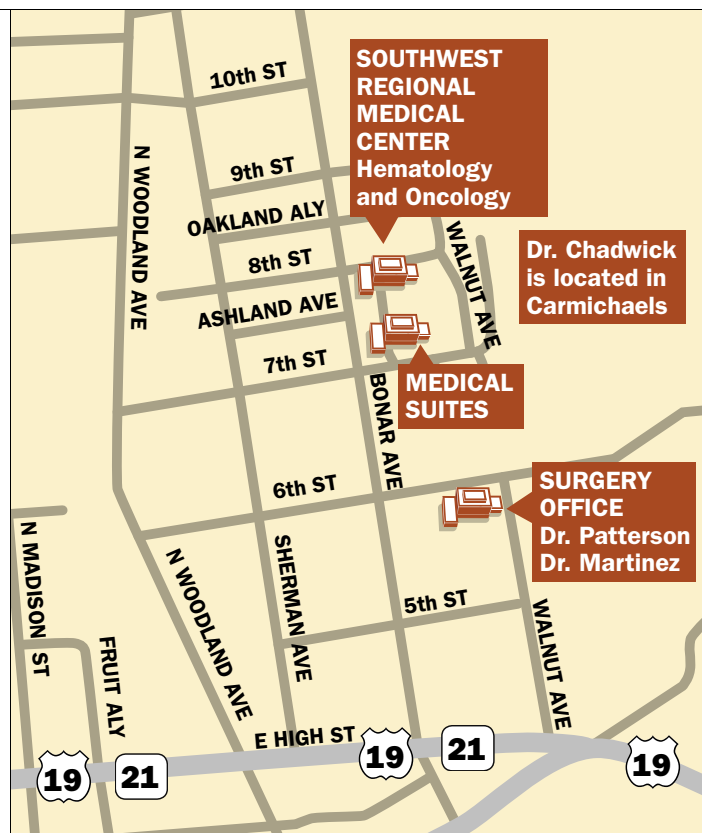
Get moving. Boost energy, beat stress, feel better! Exercise can help with all three. Experts recommend a minimum of 30 minutes of moderate-intensity physical activity, such as brisk walking, at least five days a week. More vigorous pursuits—like running, swimming and jumping rope—are great too, once you're ready.

Take steps for health—literally. When you can, use the stairs instead of the elevator. Take a 10-minute walk on your break. Consider getting a pedometer so you can track all your steps.



Try making small changes—and build up some healthy momentum.

Where to find us



THE PULSE is published as a community service for the friends and patrons of SOUTHWEST REGIONAL MEDICAL CENTER, 350 Bonar Ave., Waynesburg, PA 15370, telephone 724-627-3101.

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Information in THE PULSE comes from a wide range of medical experts. If you have any concerns or questions about specific content that may affect your health, please contact your health care provider. Models may be used in photos and illustrations.

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