Mary Bahen - mother of Allie, Joey, and Nikki - is grateful a 3D mammogram caught her breast cancer early.
The Man Behind the Mission
Xinis Announces Retirement After 27 Years at CMH

Jim Xinis knows a lot about working hard. He learned it as a teenager when tips from waiting tables in New York City restaurants paid his way through college. He had a full-time job when he attended graduate school at night.

And it carried him through the 80-hour weeks during his early years as president and CEO of Calvert Memorial Hospital and the many 12-hour days that followed.

When he steps down at the end of February, Xinis will have earned the distinction of being one of the longest-serving president and CEOs of any hospital in Maryland. The day he walked through the doors at CMH in November of 1987, the picture that greeted him was far different than the one that will welcome the next chief executive, Dean Teague (See related article on page 5.)

"Jim has led Calvert Memorial Hospital through an era of tremendous change, setting a clear, strategic vision that has produced tremendous growth and tremendous quality and experience for the patient," said CMH Chairman of the Board Kevin Nietmann. "Dean will continue that tradition."

Nietmann went on to add, "Jim's countless contributions, leadership and steadfast commitment to patients, staff, physicians and the community have made CMH and Calvert Health System (CHS) stronger and created a lasting legacy."

Xinis is largely credited with leading the small, non-profit community hospital to become a major Calvert

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1984 – Initiated behavioral health day treatment program for adolescents in tri-county area
1990s – Adopted Total Patient Revenue (TPR) system early to reduce hospital costs
1994 – Spearheaded development of Calvert Community Health Improvement Roundtable to address unmet needs
1996 – Established onsite child care center for employees and community
institution and top regional healthcare provider. In 2013, CMH earned the Leading Edge Award as Calvert County Business of the Year for its forward-thinking, constant innovation and unwavering dedication to the community.

The largest private employer in Calvert County, CHS has over 1,200 employees and saw $138 million in gross revenue last year. Its subsidiaries include an employed physician network, a home health agency, a diagnostic imaging facility and centers for urgent care, radiation and physical therapy.

The Early Challenges
Xinis had planned to go to law school but a casual conversation with Dr. Benjamin Match, then president and CEO of Long Island Jewish Hospital—a longtime customer at a restaurant where he worked, set him on a different career path. He shadowed Dr. Match for several days and was hooked. “I was fascinated by what he did and how much influence he had,” recalls Xinis. He enrolled at NYU and got his master’s in public administration with a major in healthcare administration.

Following graduate school, 25-year-old Xinis got his first healthcare job at Prince George’s General Hospital, where he met his wife, Debbie. “We had 10 great years there, before we moved to Cumberland for a short while and then Calvert.”

“I remember my first day at CMH distinctly,” he said. “I had less than one day of transition. (Outgoing administrator) Connie Rove prepped me on the big issues and priorities before she left.” The hospital was in the midst of severe financial difficulties due to limited cash flow and labor issues following a large layoff the prior year were placing additional stress on the organization.

“Upon his arrival, I had to summarize for him the grim news on the hospital’s financial position,” said Martha Rymer, who was assistant comptroller at the time and later promoted to CFO. “Jim rolled up his sleeves and worked long hours and weekends with the management team to fine-tune a solution.”

She went on to add, “I feel this experience very early in Jim’s tenure at CMH set the tone on the importance of good financial management in a hospital. From that point on, he never shied away from a fiscal challenge.”

The Growing Years
His savvy stewardship has contributed substantially to the hospital’s healthy balance sheet. Through much of his tenure, CMH maintained an A3 bond rating that enabled the institution, which is the sole acute care provider in Calvert, to take advantage of favorable interest rates to borrow and refinance, as needed.

In 1989, he approached key supporters of the hospital about forming a non-profit foundation that would provide an ongoing mechanism for generating funds from the community through annual events like the ball and golf tournament to further its mission to provide quality health care to the people of Southern Maryland.

“Talking to patients has taught me the most. Hearing from them about their experiences enabled me to address the most important issues.”

Continued on next page
Once the hospital was on a sound financial footing and had paid off its mortgage to the county, his considerable energy shifted to shaping a strategic vision that would move CMH into prominence as a regional healthcare provider known for quality and innovative care.

In 1994, CMH joined with hospitals in St. Mary's and Charles counties to form the Chesapeake-Potomac Healthcare Alliance. One year later, they collaborated to create a home health agency to serve Southern Maryland. In 2006, they developed the Chesapeake-Potomac Regional Cancer Center, which provides state-of-the-art radiation therapy for the tri-county area.

Xinis was also the force behind the establishment of the “Best of Breed” clinical alliances that brought the region’s top experts in breast diagnostic imaging and surgery, interventional cardiology, vascular surgery, gynecologic oncology, neurosurgery, and gynecologic urology as well as pediatrics and high-risk obstetrics close to home.

“I think Jim’s greatest gift was his ability to leverage strategic partnerships with tertiary centers to bring specialists here,” said former county commissioner Mary Krug, who served on the hospital’s board of directors for 22 years. “He took the best from everyone while still maintaining our independence as a true community hospital without sacrificing any quality.” As of today, CMH is the only independent hospital in Southern Maryland and we are among only 20 percent of hospitals in the state that remain independent.

His guiding philosophy has always been “to continuously grow the organization to meet the needs of the community we serve and to ensure that the services we provide to our patients are of the highest quality,” he said.

As the county grew, so did Calvert Memorial Hospital – recruiting 107 primary and specialty care physicians, adding satellites in Dunkirk, Solomons and Twin Beaches and expanding its campus through two major capital campaigns – to fulfill its mission to take care of those in need.

This construction boom included three on-campus medical office buildings and new surgery, family birth and wellness centers that were followed by a much-expanded emergency department, a new Critical Care Unit and a concourse dedicated to outpatient services.

Despite this growth, Calvert Memorial still remains one of the lowest cost hospitals in the state, saving millions of dollars for area residents. Last year alone, it provided over $9 million in charity and uncompensated care.

Xinis was clearly ahead of the cost-cutting curve by adopting the Total Patient Revenue (TPR) system early. The goal is to help patients with chronic conditions like diabetes and hypertension stay well at home and keep them out of the hospital, where the cost of health care is the highest.

A Laser Focus on Quality

“Jim has made quality care the focus and basis for all decisions throughout his time at Calvert Memorial,” said Sally Showalter, a 12-year board member and former nurse at the hospital.

She went on to add, “This is evidenced by CMH earning the Excellence Award for Quality Improvement four years in a row from the Delmarva Foundation and being rated a Top Performer on Key Quality Measures* by The Joint Commission,

1972 Graduated with a bachelor’s in economics from University of Maryland
1974 Earned a master’s in public administration with a major in healthcare administration from NYU
1975 Started his healthcare career at Prince George’s General Hospital and Medical Center
1985 Joined Memorial Hospital and Medical Center of Cumberland, MD as executive vice president
1987 Appointed president and CEO of Calvert Memorial Hospital
1996 Received Maryland Hospital Association’s highest honor for distinguished service
2001 Helped create Calvert Healthcare Solutions to serve the uninsured and later helped them enroll in the state’s healthcare exchange
2007 Named to CareFirst BlueCross Blue Shield Board of Directors
2012 Co-chaired state advisory group that made recommendations about essential health benefits as part of federal healthcare reform
Delmarva Foundation is delivered so professionally most astounding is how that care accomplishes every day. What’s extraordinary work that our staff "The biggest thing I feel is the hospital today, he said, "When Xinis walks around the attention on what we need to have in we do focus a lot of resources and experiences are at the desired level for some healthcare organizations. He’s also looking forward to serving on the boards of some organizations "that I have a great deal of respect for and that are important to me" along with spending more time with his family and traveling. "I’ve been privileged and honored to work alongside some of the best physicians and staff I have ever met," said Xinis. "I will miss the daily camaraderie and relationships I have built but I know the time is right to move on and that CMH is in good hands with Dean." He went on to add, "I feel good that I’m leaving at a time when the quality of patient care and safety is at an all-time high and the hospital is well-positioned for the future. There will be challenges but I am confident that this organization is up to taking on those challenges." The nation’s leading accredditor of healthcare organizations.” These honors were significant because they compared Calvert’s clinical outcomes to national benchmarks. CMH is also widely respected as a leader of innovative medicine – scoring many “firsts” along the way. It was the first to adopt hospitalist medicine in Southern Maryland; the first to implement critical care telemedicine in Maryland and the first to launch a community health information exchange in the state. (See related article on page 20.) “Jim has always been a forward thinker and that has made him a leader in hospitals in Maryland,” said former CMH board chairman Cliff Stewart who also served at the state and regional level.

For Xinis, quality and patient safety will always go hand in hand. “It’s important that the public knows we’re looking at patient safety at the highest levels,” he said. “It continuously garners our attention on a daily basis.”

He went on to add, “Anytime a patient is harmed, we do a complete root cause analysis to learn how we can do things better in the future. Each year, we have about 150,000 patient encounters. Not all of these experiences are at the desired level from our perspective or theirs but we do focus a lot of resources and attention on what we need to have in place to ensure the best possible care.”

The Next Chapter

When Xinis walks around the hospital today, he said, "The biggest thing I feel is the extraordinary work that our staff accomplishes every day. What’s most astounding is how that care is delivered so professionally and efficiently but in such a personal manner.”

His decision to stay at CMH for so many years was based on both personal and professional reasons. "As most people who move to Calvert realize in a relatively short time, it’s a great place to live and raise a family … additionally, my wife's parents retired here," he said. "On the professional end, there were the working relationships with the board of directors and the medical staff. That triangle of leadership was critical to the success of the organization and has enabled us to do great things.” This sentiment was echoed by Dr. Issam Damalouji, who served 36 years as chief of staff. "Jim built solid relationships with the medical staff," said Dr. Damalouji. "He always consulted the leadership on major issues. I think this was one of the main reasons for his longevity.”

The first day he doesn’t have to drive to the hospital, Xinis said, "is going to be very difficult and I think a little strange" but he’s already moving ahead and has established a consulting business to work for some healthcare organizations. He’s also looking forward to serving on the boards of some organizations "that I have a great deal of respect for and that are important to me" along with spending more time with his family and traveling. "I’ve been privileged and honored to work alongside some of the best physicians and staff I have ever met," said Xinis. "I will miss the daily camaraderie and relationships I have built but I know the time is right to move on and that CMH is in good hands with Dean.”

Teague's selection follows a comprehensive search process that included members of the CHS executive management team and board of directors. For the past two years, he has been responsible for leading the day-to-day operations of the hospital and overseeing key service lines including cardiovascular, emergency services, oncology and diagnostic imaging among others.

As part of the leadership transition plan, he has worked side-by-side with Xinis, who has served as president and CEO since 1987. Before joining CMH, Teague served as senior vice president of operations for seven years at Washington Adventist Hospital.

In 2006, he retired from the US Navy after 24 years of active duty. Prior to that, he was the chief operating officer for three years of the White House Medical Unit, which provides health care for the president, vice president and the cabinet members.

He has a master’s in healthcare administration and is a fellow of the American College of Healthcare Executives. Teague and his wife, Pam, have been married for 29 years and have a daughter, Kaitlyn, who is a senior at the University of Maryland in College Park.
Shah Associates Adds Gastroenterologist

**Shah Associates is pleased to announce the addition of board-certified gastroenterologist Dr. Nick Khatri who specializes in colon cancer screening, esophageal disease and managing gastrointestinal bleeding and pancreatitis. He will see patients in the Prince Frederick office located in Suite 300 in the Calvert Medical Arts Center.**

Dr. Khatri completed his residency in internal medicine at MedStar Georgetown University Hospital in Washington, DC and stayed on to complete his gastroenterology fellowship there, as well. “This is an ever-evolving field that allows me to truly improve the quality of life of many patients,” said Dr. Khatri. “Being able to swallow or have regular bowel movements are facets of everyday life, which every person should be able to do without worry.”

He went on to add, “I believe in taking care of one patient at a time and doing so safely, thoroughly, professionally, and with the patient’s best interests in mind. I want my patients to leave my office having a diagnosis, understanding that diagnosis, and knowing how my team and I are going to make them better.”

Dr. Khatri said he had the opportunity to take care of many patients from Southern Maryland during his years of training at MedStar Georgetown University Hospital “and many have left an indelible mark on me as a person and physician. As I join Shah Associates in its 40th year of serving the Southern Maryland community, I could not think of a better group of people that I’d like to serve for the next 40 years.”

New OB/GYN Specialist Joins Calvert Group

Board-certified obstetrician and gynecologist **Dr. Hilary Ginter** has joined Calvert OB/GYN Associates of Southern Maryland. She will be providing general OB/GYN care at the group’s Prince Frederick and Solomons offices.

She has over 15 years’ experience, 10 years in a small private practice and five years in a large, federally funded health clinic. Her special interests include abnormal PAP screening, colposcopy and contraception. Dr. Ginter graduated from George Washington University School of Medicine and went on to complete her internship and residency in OB/GYN at Sinai Hospital in Baltimore.

“I see my role as one of a listener and an educator,” said Dr. Ginter. “I want to make sure my patients feel comfortable talking to me about any issues, that I educate them about all of their options and help them make the decisions that fit them best.”

She went on to add, “I enjoy partnering with my patients to make healthcare decisions on reproductive health and delivery options. I also like the diversity of the OR, office and delivery room.”

**CPA to Oversee Nasr Practice**

The Calvert Health System family mourns the loss of longtime community family medicine physician, Dr. Rafik Aboul-Nasr, who died suddenly on Dec. 21. The Nasr family has asked Calvert Memorial Hospital and its employed physician group, Calvert Physician Associates (CPA), to undertake the responsibility of following up on his patients.

CPA is helping to provide medical coverage for Dr. Nasr’s patients and has taken charge of their medical records. The office staff is working diligently to make the transition as easy and uneventful as possible. Patients have the option of choosing to remain with CPA or transferring to another provider.

To ensure the continued privacy, security and accessibility of patient files, this information will be maintained by Calvert Physician Associates at 225 Town Square Drive, Suite 2, Lusby, MD 20657.

If patients opt to go with another provider, their records will be promptly transferred upon notification. A written request is needed to release medical records. Patients should call the office at **410-326-8100** to coordinate or send a written request to: Records Request, Calvert Physician Associates, 225 Town Square Drive, Suite 2, Lusby, MD 20657.
New Child Psychiatrist Joins CMH

Board-certified psychiatrist
Dr. Manan J. Shah has joined Shah
Associates and will be seeing
patients in the Prince Frederick
office located in Suite 300 of
the Calvert Medical Arts Center
and in Suite 207 at the Dunkirk
Medical Center.

In addition to psychotherapy and medication management, he will provide psychiatric consultations and help to manage patients on the inpatient unit at Calvert Memorial Hospital.

Dr. Shah, who completed a fellowship in child and adolescent psychiatry at the University of Virginia, specializes in diagnosing and treating mental health illnesses arising in infancy, childhood and adolescence. He is experienced in psychotherapy and medication management. His special interests include ADHD, autistic disorders, neuropsychiatry and psychopharmacology.

“Most mental illnesses have their roots in childhood,” said Dr. Shah. “Today, children are burdened with a lot more but our expectations for them continue to rise. I enjoy seeing children and helping them and their parents recognize and manage their struggles. I derive immense satisfaction when I can help them overcome these problems, which allows them to lead healthy and productive lives as adults.”

Dr. Shah is a graduate of Rajiv Gandhi Medical College and went on to complete his specialty training in psychiatry and a two-year fellowship at the University of Virginia Health System in Charlottesville, Virginia. He is active in local and national professional organizations and has published research papers and won honors and awards.

Hospital, Health Workers Prepare for Possible Ebola

Calvert Memorial Hospital is working with local, state and federal public health agencies to ensure that its physicians, nurses and frontline personnel have the proper training, equipment and protocols to effectively respond should any potential Ebola patient need care.

Even though the risk is very low, the hospital and health department have teamed up with our local EMS (emergency medical services) to develop a coordinated system of surveillance and response to any possible cases.

“This has definitely been a collaborative effort,” said Kasia Sweeney, spokesperson for the hospital. “Our emergency planning committee and infection control practitioners have been in regular contact with the Maryland and CDC experts on Ebola to protect our community, as needed.”

She went on to add, “As the Centers for Disease Control and Prevention (CDC) and the World Health Organization have updated their protocols and recommendations for patient care and for personal protective equipment, we have updated our policies and procedures at the local level.”

CMH President and CEO Jim Xinis said that a special infection control task force headed by board-certified infectious disease specialist Dr. Paul Pomilla is charged with ensuring that the organization stays abreast of the latest CDC and state of Maryland guidelines for emerging diseases like Ebola.

He added, “It’s important for the community to know that we have the expertise and supplies needed to care for infectious disease patients.”

Signs have been placed at points of entry into the hospital alerting community members to the importance of providing travel history if they recently visited affected areas. The hospital also held a briefing for its medical staff where Calvert Health Officer Dr. Larry Polsky shared the information that physicians need to know and conducted a drill with local agencies.

Dr. Polsky is asking local medical offices for the next few months to screen all callers for potential exposure so as to direct any suspected cases to the hospital’s emergency department. The health officer said that if the patient is well enough they may drive to the hospital. If that is not possible, the 911 dispatcher should be notified that a patient with suspected Ebola needs transportation to the hospital.

The state of Maryland has designated three regional hospitals to care for any potential Ebola patients should the need arise. Additional resources can be found at the CDC website at: http://www.cdc.gov/vhf/ebola.
Keeping Our Youngest Patients Safe

To constantly improve pediatric patient safety, Calvert Memorial Hospital uses best practices, improved technology and specialized equipment to help us prevent problems and protect your child. Parents can then focus on what matters most during their stay – giving their child the love, support and reassurance that only a parent can provide.

“We are continuously looking for ways to improve patient safety and quality,” said Susan Dohony, chief quality officer at CMH. “It is essential to all that we do.” She explained that safety at CMH is a multi-faceted approach that includes the patient and their families as well as the hospital and its staff.

“We encourage parents and caregivers to play an active role with the healthcare team,” said Dohony. “We expect questions and are happy to explain what we are doing and why.”
Learning From the Best
CMH bases its processes and protocols on “best practices” or what has been shown to be effective over time according to the latest evidence-based research. For example, two years ago the hospital made the switch from scales that documented weights in pounds to new ones which rely on the metric system (kilograms) for weight-based calculations to ensure that any medication prescribed for pediatric patients is accurately calculated for their size.

According to CMH Pharmacy Director Kara Harrer, PharmD, this was a hospital-wide endeavor that involved a multidisciplinary team of physicians, nurses, educators, pharmacists, respiratory therapists, information technology and administrators.

She said the group spent over a year amending policies and procedures, making changes to software programs and developing a comprehensive educational tool to standardize both the equipment and the process used for documenting weights.

Additionally, the CMH Pediatric Medication Safety Team, led by board-certified pediatrician and neonatologist Dr. Deborah Hoy of MedStar Georgetown University Hospital, has created standardized “order sets” or tasks to standardize care for specific conditions such as asthma, croup and pneumonia.

For example, Dr. Harrer said, the asthma order set includes an assessment tool that clinicians can use to determine whether a nebulizer is needed. She also added that pediatric prescription orders for high-risk medications are double-checked by the pharmacists at CMH.

Built-in Safeguards
Dr. Harrer added that certain equipment that administers medication to pediatric patients has built-in safeguards that add an extra level of protection. For instance, she explained, there is a chamber in IV lines to prevent accidental fluid overload due to programming. Dr. Harrer said that too much fluid can cause congestion.

According to the pharmacy director, the smart intravenous (IV) pumps that CMH implemented throughout its facility in 2012 also feature customized software that contains a drug library with a special section on pediatric and neonatal dosages.

Dr. Harrer said this software essentially transforms a conventional IV pump into a computer that sends an alert if an infusion is programmed outside a particular medication’s recommended limits for dose, rate or concentration based on a patient’s age, weight and medical condition.

Going above or below the limit will prompt the machine to sound an alarm, notifying the clinician of the error and how to fix it. “So even if a staff person accidentally presses the wrong button,” she said, “the smart pump lets you know before you administer the medication.”

In 2013, CMH implemented computerized physician order entry (CPOE) hospital-wide. Dr. Harrer said the system replaces paper orders and includes clinical decision support that assists physicians in evaluating if a dose is appropriate.

CT Scans Have Risks
One particular area of concern is the use of radiation-intensive CT scans in children. Three specialty groups have made recommendations to avoid the use of CT scans in children for certain conditions – such as a minor head injury.

Those recommendations are part of the Choosing Wisely® campaign supported by the American Academy of Pediatrics, which has sought to reduce the use of imaging and exposure to radiation and encourage use of alternative imaging methods.

If your child has a mild concussion, a CT scan will probably not be helpful. CT scans are better for other kinds of injuries, such as skull fractures or bleeding of the brain. A concussion is not caused by bleeding in the brain. Additionally, CT scans use radiation, which can increase the risk of cancer. Children, and especially infants, have greater risks because their brains are still developing.
Sheldon E. Goldberg Center for Breast Care Welcomes New Surgeon

A new relationship between the Geaton and JoAnn DeCesaris Cancer Institute Breast Center at Anne Arundel Medical Center and Calvert Memorial Hospital brings Dr. Wen C. Liang, a fellowship-trained breast surgeon practicing at Anne Arundel Medical Center, to the Calvert breast center team.

Dr. Liang, who has been a member of the Breast Center at AAMC since 2009, started her career in Ohio, specializing in breast care and surgery in 2001. She earned her undergraduate degree at the University of Maryland and her doctorate from New York College of Osteopathic Medicine. She then completed her general surgery residency at Ohio University in Dayton, Ohio, followed by an in-depth fellowship in breast surgery at Grant Medical Center in Columbus.

She cares exclusively for breast patients and her interests include breast oncology research, oncoplastic surgery techniques and high risk breast cancer screening. She is an active member of the American Society of Breast Surgery, the Society of Surgical Oncology and the American Society of Breast Diseases.

The Sheldon E. Goldberg Center for Breast Care, located in the Calvert Medical Arts Building on the main hospital campus, offers a comprehensive approach to screening, diagnosis and treatment of breast disease. The team of breast health experts caring for center patients meets weekly to discuss each individual patient’s treatment options and coordinates care in a multi-disciplinary fashion. The program includes:

- A dedicated breast health nurse navigator
- Access to the latest imaging technology including 3D mammography
- A state-of-the-art infusion center
- A multi-disciplinary care team
- Weekly multi-disciplinary conferences
- Community outreach and education
- Genetic counseling for cancer risk
- Lymphedema management
- SOS (Survivors Offering Support) Program
- Partner Support Workshops
- Survivorship Care Planning

For more information, call 410-414-4700 or visit www.calverthospital.org
In 2013, Calvert Medical Imaging Center – the breast center’s imaging partner – added a new screening and diagnostic tool: 3D mammography, a cutting-edge technology that can detect even the most subtle signs of early cancer. Since it was implemented, some 1,733 3D exams have been performed. Here is one woman’s story.

I am a 48-year-old wife, mother, daughter, sister and nurse. I am invincible. I have to be because I need to take care of all those around me. When it was time to get my annual mammogram I almost pushed it aside because the things I needed to do, all for others, were the priority. But this time, a little voice inside me kept nagging me and said “No. This is important. You better get it out of the way.” So I made my appointment.

The morning of my appointment, I checked in, constantly watching the clock and wondering: how long will this take? The receptionist asked me: “Would you like to have the 3D mammogram for an additional fee?” My thoughts were “Do I really want to spend extra? How much longer will it take?” The reality is, if faced with the same question regarding an optional service for one of my children, I wouldn’t have hesitated but to spend the extra money on myself filled me with reluctance. Again, I heard that same little voice inside me. She reminded me of a presentation that I had recently attended about the new 3D mammography available right here in Calvert County.

I responded “Oh, why not” and underwent my mammogram, both the traditional and the 3D (tomosynthesis). “I can check that off my list” I said to myself as I walked back to my office. As I was eating my lunch, I received a call informing me that additional imaging was required. I remember thinking “the films just look different because it was a different kind of test and they need to verify that the difference was insignificant.” The reality was that the findings WERE significant. Due to the density of my breast, detecting cancer was difficult. The tomosynthesis alerted the radiologist to what turned out to be a Stage 2 cancer that was not detected on the traditional mammogram. I underwent a bilateral mastectomy. My lymph nodes are clear.

I consider myself the luckiest woman in the world. If I had chosen NOT to spend a little bit extra on myself, my story could have been very different. My prognosis is EXCELLENT. Within the next few months, my son will graduate from college, my daughter will get her driver’s license and my other daughter will go to her prom. We will all be able to look back at the pictures of these milestones and it will be a happy time because we all are HEALTHY and HAPPY. Most importantly, I learned that I am not invincible. Nothing drives this point home more than hearing the words: “You have breast cancer.” Having those words followed with “BUT, because we caught this so early, you will be just fine” is truly a gift. I have been given a second chance – all because I made the split second decision to have a 3D mammogram. Seems like such a small price to pay now.

As of January, Medicare and Medicaid are reimbursing for screening 3D mammography. Talk to your doctor to find out if 3D mammography is right for you.

“I've been given a second chance.”

- Mary Bahen, Friendship, MD
According to Dean Teague, chief operating officer at CMH, the 18-month project is a significant undertaking that will completely modernize imaging services at the hospital. “This is the only department that has not been renovated since the current hospital was built in 1978.”

He said the project will include new interventional cardiovascular and nuclear medicine suites along with a CT suite, digital radiology suite, digital mobile unit and vascular ultrasound unit.

The budget also includes $2.4 million for state-of-the-art technology. Teague said the new systems take diagnostic imaging to new levels of precision, quality and speed.

He went on to add, “This means the quicker and more accurately physicians can diagnose a problem or condition and create a detailed treatment plan.”

Patient-centered Design

“The interior design will feature elements like soothing colors and natural materials,” said Bobbie Vess, director of diagnostic imaging at CMH, “to emphasize a healing environment that is patient-centered.”

She went on to add that all of the new treatment areas have been designed to allow flexible adaptation to future technology. Vess said that renovations for the new CT and radiography suites will occur during the second phase after the addition is completed. The third major phase of the construction will include renovations to provide a new nuclear medicine suite and improvements to the reception, inpatient waiting and corridor areas.

The first phase of an $11.9 million renovation and expansion of Calvert Memorial Hospital’s Diagnostic Imaging Department began in September with the construction of an addition that will house the new interventional suite.
Precision and Performance

Additionally, Vess said the new technology improves patient safety by limiting the radiation dose to the lowest possible amount for the clinical procedure.

According to Vess, the new 64-slice CT scanner features faster screening for increased patient comfort. Speed is critical when dealing with emergency situations such as trauma, chest and abdominal pain and stroke.

CT scanning uses special X-ray equipment in combination with sophisticated computers to produce multiple images of the inside of the body. These images can be examined and manipulated on a computer monitor to be studied in greater detail.

“The technology of the new scanner is incredibly advanced and more patient friendly as compared to older scanners,” she said. For example, it only takes six seconds to complete a scan as compared to half a minute or longer with older models, which is important because patients have to hold their breath.

The scanner also has a video screen located at the top that is pre-loaded with content designed to calm children and nervous adults during the scan.

The new nuclear medicine system, said Vess, provides outstanding clarity at lower doses, which aids in faster and more definitive diagnoses. She said it will be especially useful for cardiac imaging and with fractures and lesions because it provides very good bone detail.

Nuclear medicine is a specialized area of radiology that uses very small amounts of radioactive material – comparable to the amount used for a diagnostic X-ray – to capture images of organ function and structure.

Nuclear medicine is particularly unique in that it identifies abnormalities very early in the disease process, thereby allowing for early intervention and treatment.

The budget also includes a new digital mobile unit that will be used to perform bedside radiographic exams when it is not safe or practical to move patients to the diagnostic imaging department.

Progress with Confidence

The sophisticated interventional system installed at CMH last summer (it will be moved to the addition when completed) allows doctors to see extremely detailed, real-time images of a patient’s anatomy during delicate procedures – such as placing a tiny wire mesh (stent) in a patient’s artery that require exacting precision.

Vess said the system will help physicians at Calvert Memorial Hospital treat a variety of medical disorders including diseases of the heart and blood vessels, neurovascular disorders, cancers and other conditions.

“It is critical for us to see the anatomy very clearly while guiding catheters, stents and other medical devices to areas needing treatment,” said board-certified interventional radiologist Dr. Glenn Selman, chair of the department of radiology at CMH. “The new system produces high-quality images that enable our staff to perform even the most delicate interventional procedures with accuracy and confidence.”

PROJECT HIGHLIGHTS

• $11.9 million renovation/expansion of Diagnostic Imaging Department
• Only CMH department not updated since late ’70s
• Includes 3,800 square feet of new construction
• 18-month project will be built in three phases
• Budget includes $2.4 million in state-of-art technology

(Opposite) Board-certified vascular surgeon Dr. Frederick Beavers performs a carotid angiogram to determine if there is a blockage in the carotid artery, one of the main arteries to the brain, which would require further intervention.

(Left) Nuclear medicine technician Kelly Williams reviews a cardiac study looking for any blockages in blood flow through the heart muscle.
“The single best way to protect against the flu is to get vaccinated each year in the fall,” says Neal Vasist, PharmD, MPH, a clinical pharmacist at Calvert Memorial Hospital.

The Centers for Disease Control and Prevention (CDC) recommend a yearly flu vaccine for everyone 6 months and older as the first and most important step in protecting against this serious disease.

While there are many different flu viruses, the seasonal flu vaccine is designed to protect against the main flu viruses that research suggests will cause the most illness during the upcoming flu season.

**Protecting Yourself and Others**

“There are practical things — like hand washing — we can all do to help prevent the spread of viruses,” said Marybeth Missenda, who is the transitional care pharmacist at CMH. (See related story at right)

The CDC notes that keeping your hands clean is one of the most important steps you can take to avoid getting sick and spreading germs to others. It’s best to wash hands with soap and clean running water for 20 seconds. If that’s not possible, use alcohol-based rubs.

Missenda also recommends using your elbow when you cough or sneeze, getting enough rest and staying hydrated. Try not to touch your eyes, nose or mouth — since that’s how germs are spread — and stay away from people who are coughing or sneezing.

**Using Antibiotics Properly**

Dr. Vasist says it’s important for adults and parents to understand when antibiotics are appropriate and when they will not help. In fact, in some cases, he said, they can do more harm by causing side-effects such as diarrhea, yeast infections and future antibiotic-resistant infections.

According to Dr. Vasist, antibiotics can cure bacterial infections but not viral infections. The common cold and the flu are viral infections. He stressed that using antibiotics when they are not needed causes some bacteria to become resistant to the antibiotic, and as a result stronger and harder to kill.

When you are prescribed an antibiotic, he said, it’s important to take it as prescribed. “This means completing the entire course,” said Dr. Vasist, “even if you’re feeling better.” He explained that if treatment stops too soon, some bacteria may survive and re-infect you.

**Preventing Rabies**

According to the Calvert County Health Department, rabies is known to exist in all counties in Maryland and is most frequently found in wildlife such as raccoons, foxes, skunks and bats.

Domestic animals, including livestock, are also at risk, and cats are the domestic animal most frequently identified with rabies. To protect you and your family, the health department recommends:

- Keep your pet’s rabies vaccination up-to-date
- Avoid contact with wild animals or stray domestic animals
- Confine pets to your home or yard
- Prevent bats from entering your home

If you have been bitten or exposed, wash the wound with soap and running water to reduce the risk of getting rabies and seek medical attention immediately. A series of post-exposure vaccinations can prevent rabies from developing.
About ANTIBIOTICS
Antibiotics cure bacterial infections, NOT viral infections such as:
✘ Colds or flu;
✘ Most coughs and bronchitis;
✘ Sore throats not caused by strep; or
✘ Runny noses.

Treating Cellulitis
Vasist also urges parents to be on the lookout for cuts or bug bites that don’t heal as they could indicate a common, potentially serious bacterial skin infection called cellulitis. Possible signs of a problem are redness, swelling, tenderness, pain, warmth or a fever.

Skin on lower legs is most commonly affected, though cellulitis can occur anywhere on your body or face. Most cases are mild and last several days to a couple of weeks. But cellulitis can sometimes progress to a more serious infection, causing severe illness that affects the whole body which is why it’s important to have it checked out right away.

The good news is there is a lot you can do to prevent cellulitis.

Here are some things you can do:
• Don’t scratch at scabs, insect bites or sores
• Use elbow and knee pads when you skate or bike
• Wear protective gear when playing sports
• Wear long pants and long-sleeved shirts when hiking
• Avoid going barefoot – slip into sandals, even on the beach

When You Go Home
Calvert Memorial Hospital has recently added a transitional pharmacy program that provides a pharmacist who does medication education for high-risk patients at discharge and, when needed, conducts home visits alongside the transitional care navigator to evaluate medication issues in the home.

“We target those individuals that are taking nine or more medications,” said Marybeth Missenda, who is a registered pharmacist, has a master’s in nutrition and is a certified nutrition support clinician.

“Some patients experience a lot of confusion,” said Missenda. “My job is to help them make sense of it all.” She also follows up with their primary care physician to ensure continuity of care.

She went on to add, “I see a lot of patients – especially those with diabetes – with diet issues.” Missenda also discusses the side effects of any new medications and makes sure they are able to get their medications.

“Our goal is to help them stay in their home and be happier and healthier,” said Missenda.

CMH Establishes Antimicrobial Stewardship Program
Calvert Memorial has created a multidisciplinary team to oversee the use of antibiotics in the hospital to ensure that what is given to patients is effective and safe.

The team is chaired by board-certified infectious disease specialist Dr. Lalita Chulamokha and includes members from nursing, the medical staff, quality management, pharmacy, infection control, the hospitalist group, laboratory, information technology and case management.

The role of the group is to educate, support and advise clinical staff to ensure timely initiation of antibiotics as well as appropriate administration. Additionally, they monitor data to evaluate utilization and prescribing practices and provide expertise, as needed, at point of care.

Pictured left to right are team members Marybeth Missenda, RPh; Neal Vasist, PharmD, MPH; Merideth Moody, PharmD; Mary Garvey, MT (ASCP); Dr. Lalita Chulamokha; Jean Murray, RN, MSN, CIC and hospitalist Samantha Hughes, PA.
Getting the Right Care, at the Right Time, in the Right Place

With so many options out there, figuring out where to get “checked out” isn’t always so clear, especially on a weekend or late at night. And that can lead some people to go with their first (and not always best) instinct: the emergency department (ED).

If you go to the emergency department for a minor illness or injury, you’re typically going to be there longer and your co-pay will be much higher than if you went to an urgent care center.

“Urgent care is not meant to replace your primary care physician,” said Erin Farley, RN, who manages Calvert Memorial Hospital’s three urgent care centers. “They are for people who cannot get in to see their primary care provider or the office is closed and they cannot wait until they open but the complaint does not warrant a trip to the ED.”

Farley said an urgent care need is one that requires prompt medical attention. Some examples are: minor injuries, sore throats and upper respiratory symptoms, earaches, coughs and frequent urination or burning sensation when urinating. For major illnesses or injuries, she said, you should go directly to the emergency department.

“We understand that sometimes it’s hard to make a decision where to go,” said Farley. “When in doubt, give us a call and we can help direct you to the right care so that there are no delays in your care and that you are helped to get well as soon as possible.” During office hours, she stressed, that people should call their own doctor first before going to urgent care.

CMH has three urgent care centers that provide after-hours care for adults and children in Dunkirk (410-286-7911), Prince Frederick (410-535-8911) and in Solomons (410-394-2800). The centers are open weeknights from 5-10 p.m. (Prince Frederick opens at 2 p.m.) and on weekends from noon to 10 p.m.

When you’re sick or injured, the last thing you have time for is waiting for an appointment. With CMH Urgent Care, you don’t have to. Your schedule is our schedule, and our goal is to provide timely care – when you need it most – on your time.

“Due to overwhelming input from the community, we implemented same-day appointments to reduce wait times,” said Farley, “but we welcome walk-ins at any time.” You can call as early as 10 a.m. to pre-register or go online at www.calverthospital.org to download a pre-registration form.

All of the hospital’s urgent care centers accept most insurance plans as well as Medicare or Medicaid, cash, check, Visa and MasterCard. Farley said, “No one is turned away due to their ability to pay. We see everyone.”

Did You Know?
On average, those with same-day appointments are usually seen and treated in less than one hour at the CMH Urgent Care Centers.

What’s the Difference?
Urgent care is designed to handle those less serious medical conditions that require immediate treatment but aren’t life-threatening, such as:

- Cuts, bumps and sprains
- Fever or flu-like symptoms (if younger than 1 year, go to ED)
- Cough, sore throat or earache
- Minor burns or rashes

Emergency care is needed when not receiving immediate treatment could result in loss of life or complications, such as:

- Chest or abdominal pain
- Difficulty breathing
- Stroke
- Severe bleeding
- Head injury or other major trauma
- Persistent vomiting or diarrhea
New Leadership at Calvert Memorial Hospital

**Murray Appointed Infection Control Director**

Certified Infection Control Practitioner Jean Murray, RN, MSN, CIC joined the Calvert Memorial Hospital infection control team in 2012 and was promoted to its director in June. She is a retired Navy nurse with over 21 years of leadership experience of which the last 14 were focused on infection control and disaster response.

She has the day-to-day overall responsibility for ensuring that CMH has the infection control measures in place to provide a safe environment for patients, visitors and employees. Prior to retiring from the Navy, Murray was the assistant medical director to the Chemical Biological Incident Response Force in Indian Head and was in charge of directing the medical response in a disaster hot zone.

“It is her experience and combined skills that make her an effective director of the hospital’s infection control program,” said Susan Dohony, quality control officer at CMH. For her part, Murray said, “I have been most impressed by the hospital’s genuine concern for patient safety from the nurse at the bedside to the highest levels of administration.”

**Lee to Head Medical/Surgical Unit**

Valarie Lee, RN, MSN, MHA has joined the nursing team at Calvert Memorial Hospital as the clinical manager for the medical-surgical unit overseeing daily operations. She is a master’s prepared nurse with 33 years’ experience with 27 years spent in leadership positions either as a ward master, charge nurse, manager or director.

“Valarie’s expertise as a nurse leader will raise the nursing practice on her unit to the next level,” said CMH Chief Nursing Officer Diane Couchman. “Her ability to see the big picture is a major asset.”

Lee said her top priority is raising staff satisfaction. “When the staff is satisfied because he or she is well educated, feels supported and has the tools he or she needs to complete the job this will equate to happier physicians, happy patients and families.”

She went on to add, “My mantra is a well-prepared nurse will provide excellent care to all patients assigned. I’m looking forward to working with the Calvert team in making CMH the hospital of choice for the surrounding communities.”

**Rice to Manage Documentation Team**

Teri Rice, MS, RN who joined Calvert Memorial Hospital in 1992, has been promoted to operations manager of the Documentation Improvement and Recovery Team. Over the past 20 years, Rice who has a master’s in nursing, rose through the ranks from a phlebotomist in the laboratory to a scrub tech in the operating room and then as a nurse in the endoscopy center.

Her current role involves monitoring clinical documentation for quality improvement opportunities, both clinical and regulatory. She also works to ensure appropriate billing to the insurance company by reviewing patient records for proper documentation after a hospital visit. This helps the hospital comply with federal regulations and ensures patients get accurate information about their hospital insurance claim and possible out-of-pocket expenses.

“Teri is a fountain of knowledge about utilization, regulatory and documentation requirements,” said Karen Twigg, BSN, RN, CMCN, director of care coordination and integration at CMH. “Her ability to translate these requirements into new and enhanced processes also helps to better the patient experience.”

**Cooper to Lead Progressive Care Unit**

Lorri Cooper, MSN, RN has joined the nursing team at Calvert Memorial Hospital as clinical nurse manager for the Progressive Care Unit, which cares for patients admitted for conditions such as chest pain, respiratory problems, vascular disorders or chemotherapy administration for cancer.

“Lorri has a straightforward leadership style,” said CMH Chief Nursing Officer Diane Couchman. “Her enthusiastic and positive attitude is contagious to those around her.”

Cooper has been a nurse for 15 years and has extensive critical care experience. She obtained her master’s in nursing leadership and administration from Notre Dame of Maryland University and graduated with honors. Cooper is also a member of the Honor Society of Nursing Sigma Theta Tau International.

During her graduate studies she traveled to Ireland twice where she participated in teaching first-year nursing students assessment skills, participated in a debate regarding health policy and implemented communication and reporting tools to improve patient safety.

“I feel honored and fortunate to be a member of such a supportive leadership team at CMH that focuses on patient care,” said Cooper. “My priorities for the coming year are to work closely with the nursing staff and physicians to ascertain how we can exceed the exceptional care CMH already provides to the community.”
With the combined support of nearly 900 attendees, as well as dozens of supporters and sponsors, the popular black tie gala raised an estimated $400,000 this year. Proceeds generated by the charity event will directly support state-of-the-art diagnostic imaging technology at CMH.

By all measures, the 2014 Harvest Ball exceeded expectations with record attendance and easily surpassed the prior year’s event, which netted $130,000. Organizers attribute the overwhelming success to an outpouring of respect for Xinis, who is largely credited with leading the small, non-profit community hospital to become a major Calvert institution and top regional healthcare provider.

It was a feel-good evening all around from the exciting new venue to the compelling personal stories and a surprise video tribute for the honorary chair who was surrounded by friends and family.

Emcee Doug Hill of ABC7 Weather, who lives in Huntingtown, shared how an accurate early diagnosis at Calvert Memorial’s emergency department was critical to his wife’s recovery from a life-threatening brain aneurysm.

Presenting sponsor Dr. Vinod Shah of Shah Associates talked about how the quality of care at Calvert Memorial has excelled under the leadership of Xinis. “The dynamic changes you see on the hospital campus are all due to his visionary leadership.” His enthusiastic remarks were greeted with a rousing round of applause.

Another presenting sponsor and longtime hospital supporter, Gerald Donovan of Chesapeake Beach Resort & Spa, lead the video tribute with: “Jim, you are recognized across the state as one of the best hospital administrators . . . what you did has saved lives. You have affected every family – including my family.”

Rep. Steny Hoyer thanked Xinis for his extraordinary service and contributions to Calvert County and its people. Sen. Ben Cardin praised his willingness to collaborate and partner with others who could make a difference.

Maryland Hospital Association President and CEO Carmela Coyle said, “Jim has made Calvert a true example of what it means to focus on wellness.”

American Hospital Association President and CEO Rich Umbdenstock summed it up best when he said, “Real leadership goes beyond the organization and influences the entire community for the better and that’s certainly what has happened with Jim’s work at Calvert Memorial.” The video drew a standing ovation from the record-setting crowd that included many past hospital board members and employees as well as state and local officials.

For his part, Xinis focused on how donations to the CMH Foundation make a lasting impact on the hospital’s ability to care for the community. “At the time I planned my retirement and agreed to serve as honorary chair for the ball, I had no idea that I would face a personal diagnosis of lymphoma.”

Xinis went on to recount how he received treatment in Calvert’s Infusion Therapy Center that was renovated with funds raised by the ball in 2007 and how his chemotherapy was administered using the smart IV pumps that were purchased with proceeds from the 2011 ball.

“I am living proof that you never know when your life will depend on the technology and the doctors at Calvert Memorial Hospital,” he added.

According to CMH Foundation Director Dixie Miller, this year’s ball drew unprecedented support from the community with 119 sponsors including physician groups, county businesses, local residents and hospital vendors.

“We are so grateful to all of those who made this evening possible,” she said, “from our amazing Harvest Ball Committee to our sponsors and all of the attendees. It is truly humbling to see such a spectacular show of support. Your generosity will help us build and sustain our hospital for generations to come.”

Pictured (l-r) are Harvest Ball Co-Chair Mickie Frazer with CMH President & CEO Jim Xinis and Harvest Ball Co-Chair Cindy Parlett.
CMH Foundation Announces SCHOLARSHIP AWARDS

The Calvert Memorial Hospital Foundation is excited to announce the 10 recipients of its scholarships awarded to students pursuing higher education in an allied health field. Since the program began in 1991, it has awarded close to $395,000 to 314 local students.

“Providing scholarships to support future healthcare providers and encourage those who seek to build their knowledge and skills to better serve others in health care is one of the most rewarding things we are able to do through the CMH Foundation,” said Dixie Miller, director.

Recipients for 2014 included five students from Calvert County, two from St. Mary’s and three from Anne Arundel. Six are pursuing a degree in nursing. The others are studying radiography, occupational and physical therapy.

The winners are Andrea Beckman of Leonardtown who is attending the University of Maryland Baltimore; Audrey Fordham of St. Leonard who is attending Georgetown University; Tierney Guido of Prince Frederick who is attending Thomas Jefferson University; Michaela Miller of Huntingtown who is attending Messiah University; Kristen Mills of Mechanicsville who is attending the College of Southern Maryland; Rose Montgomery of Annapolis who is attending Villanova University; John Richey of Davidsonville who is attending Towson University; Alexis Smith of Lusby who is attending the College of Southern Maryland; Bridgette Wisniewski of Huntingtown who is attending Mount St. Mary’s and Jamie Wood of Friendship who is attending the University of Maryland Baltimore.

The Allied Health Scholarship Fund was created by an endowment from the Calvert-Arundel Medical Facilities, Inc. Recipients are not required to repay the Foundation or accept employment at CMH. To obtain an application, call 410-414-4570 or download the form at www.calverthospital.org.

Pictured above (l-r) are: CMH Foundation board members Maria Lubrano and Mickie Frazer with 2014 scholarship recipients: Alex Beckman, Audrey Fordham, Tierney Guido, Andrea Beckman, Michaela Miller and John Richey, Foundation Vice President Lynette Entizen, Foundation Secretary Cindy Parlett and Foundation Director Dixie Miller.
Calvert Memorial Named 2014 Most Wired

Calvert Memorial Hospital has been named one of the nation’s “Most Wired” by the American Hospital Association. It is one of only six hospitals in Maryland and 375 nationwide to be recognized. The award is given to those healthcare organizations that have adopted a broad level of information technology that enhances quality care, improves patient safety and promotes better care coordination.

Ed Grogan, chief information officer at CMH, said the health system is honored to be among the Most Wired. “We credit the foresight and vision of our board of directors who have made a significant investment in information technology.” The hospital has spent over $15 million in the past decade on modernizing and upgrading its information systems.

He went on to add, “We are always looking for ways to better coordinate and improve the quality of care our patients receive. We believe that leading the way in health information technology is just one more way we can provide better service.”

According to Grogan, CMH was the first hospital in Maryland to implement critical care telemedicine. The system, allows intensive care physicians and veteran critical care nurses at a remote center to monitor crucial indicators such as blood pressure, heart rate, oxygen levels, respiratory rate and lab results for early warning signs and intervene proactively, when needed.

He said the advanced technology has contributed to lower mortality and readmission rates. Calvert Memorial was also the first in its region to implement barcode technology for positive patient identification when administering medications and collecting specimens. Grogan said this has virtually eliminated specimen mislabeling errors.

In 2013, CMH implemented computerized physician order entry (CPOE) hospital wide. It replaces paper orders and has resulted in a 41 percent reduction in medication errors. It also includes clinical decision support such as reminders and evidence-based research to assist physicians in clinical decisions.

Additionally, Calvert Memorial was a leader in implementing a community health information exchange and is one of only a few healthcare organizations in the state which hosts electronic health records for independent physician practices.

The Calvert Health Information Exchange (C-HIE), which connects participating practices with the hospital, three outpatient labs and two imaging centers, increases the level of information available to physicians which they can use in clinical decision-making, resulting in a higher level of care, better patient outcomes and reduced duplicative testing.

In July, the hospital launched its new online patient portal, called “My CMH Care,” that offers patients the convenience of accessing their information online, through the hospital website at www.calverthospital.org, at any time from almost anywhere.

Through the portal, patients who have been hospitalized will be able to review, download, print and transmit essential medical information, such as lab and radiology results, discharge instructions, prescribed medications and scheduled appointments for reference.