INGALLS DODDCOSS WINTER 2016

Lock it Spray

ULTRA

Professional Industrial Strength

"Cast of Caregivers" Share the Stage with Ingalls Patient and *Hairspray* Choreographer Charlie Misovye after Innovative Hip Surgeries

Mother and Daughter Face Cancer Together New Treatment for Peripheral Artery Disease Scoliosis Surgery Corrects Spine Curvature

Ingalls

Letter to the Community



President and CEO Kurt Johnson and Board Chair Eugene Feingold

I am thrilled to share the news that Ingalls Health System recently signed a Letter of Intent (LOI) to pursue an affiliation with the University of Chicago Medicine. Our Nov. 12 announcement marked the culmination of a several-month process of identifying a health system partner that will complement and enhance healthcare for patients throughout the Southland.

Throughout this process, we were in the enviable position of having several leading health systems pursue an affiliation with Ingalls. After all, Ingalls is healthy financially, provides an unmatched array of quality services, and has the most comprehensive outpatient network in the region. But UChicago Medicine rose above the rest for several reasons.

For starters, they share our mission and will be an excellent cultural fit for our organization. Secondly, they are a nationally recognized academic medical center that will enrich and enhance the array of healthcare services we can offer our patients. Their scope is truly inspiring: UChicago Medicine comprises the University of Chicago Medical Center, Pritzker School of Medicine, the University of Chicago Biological Sciences Division and a full range of specialty care services for adults and children through more than 40 institutes and centers including an NCI-designated Comprehensive Cancer Center. What's more, UChicago Medicine has a long history of breakthrough research, including 12 Nobel Prize winners in physiology or medicine.

The tipping point for our Board of Directors is that UChicago Medicine shares our commitment to the communities that we have been privileged to serve for more than 90 years. In fact, they are planning for the Centers for Advanced Care in Orland Park and in the South Loop; that means more cutting-edge healthcare services close to where you live and work.

We believe there are many benefits to affiliation. Through this merger of assets and resources, Ingalls will be able to invest in our facilities and enhance our technologies at an accelerated pace. It will allow us to focus on providing innovative

services, a talented team of healthcare professionals and a strong regional network of top-rated outpatient services close to home. Additionally, this affiliation ensures that Ingalls and our physicians remain accessible to our patients in an increasingly uncertain healthcare environment – and enables us to continue to attract even more high-quality doctors and specialists.

You have my assurance that Ingalls will continue to provide the same high level of care that it has always provided. We will retain our own Board of Directors, and all gifts made to the Ingalls Development Foundation will remain local.

Over the next several months, Ingalls and UChicago Medicine will engage in exclusive negotiations, carry out due diligence and begin planning the terms of our potential affiliation. A formal closing date is expected in the late spring/early summer, and any affiliation will be subject to a definitive agreement and the necessary regulatory approvals.

We will keep you informed of our progress and look forward to serving you with unparalleled healthcare services in the years ahead.

> Kurt E. Johnson, President and CEO Ingalls Health System



Dr. David Smith

On the cover: And the Show Went On! The Drama Group President Charlie Misovye poses with some of his "cast" of caregivers from the Ingalls Advanced Orthopedic Institute. The caring crew came to watch The Group's critically acclaimed production of *Hairspray* at the Bloom Theater in Chicago Heights last spring.

For Misovye, who underwent two anterior hip replacements at Ingalls within the last year, the show definitely went on! "I would like to encourage anyone with hip pain to investigate the anterior hip replacement surgery with Dr. David Smith and the attentive staff at Ingalls Memorial Hospital," he explains. "You'll be glad you did!"

With hip pain behind him, there's no stopping the energetic entertainer! Next up is Theatre at the Center's Theatre for Young Audiences' production of *The Wizard of Oz* and The Drama Group's Daytime Children's Theatre production of *The Velveteen Rabbit* in the spring.

Break a leg, Charlie and crew!

Good news is meant to be shared!

And we're proud to say we've gotten a lot of it lately, especially about the great job we're doing for our patients.

So we thought we'd share a few notes with you:



Ingalls is proud to announce we are now an accredited Chest Pain Center by the Society of Cardiovascular Patient Care (SCPC). Accredited hospitals like Ingalls have achieved a higher level of expertise in assessing, diagnosing and treating patients who arrive with symptoms of a heart attack. To our community, this means we have processes in place that meet strict criteria aimed at:

- Reducing the time from onset of symptoms to diagnosis and treatment
- Treating patients more quickly during the critical window of time when the integrity of the heart muscle can be preserved
- Monitoring patients when it is not certain that they are having a heart attack to ensure that they are not sent home too quickly or needlessly admitted to the hospital.

HealthCare's MOST WIRED

Ingalls is truly leading the charge when it comes to technology. And for the second year in a row, we've received recognition that confirms it. Out of more than 2,200 U.S. hospitals, only 338 made it to 2015's "Most Wired[™]" list, demonstrating some of the most advanced health information technology use and adoption in the nation. Ingalls was the only independent hospital in the region to earn the distinction that lauds hospitals for their efforts to improve patient documentation, advance clinical decision support and evidence-based protocols, reduce the likelihood of medication errors and rapidly restore access to data in the case of a disaster or outage.



Ingalls has been recognized by Cigna and Blue Cross for delivering on its promise to provide high-quality, cost-effective care.

The Cigna Centers of Excellence program cited Ingalls for excellence in 11 different clinical areas for 2016:

- Abdominal Hysterectomy
- Cardiac Pacemaker Implant
- Cesarean Section
- Gall Bladder Removal, Laparoscopic
- Hip Replacement
- Knee Replacement
- Stroke
- Vaginal Delivery
- Cardiac Catheterization and Angioplasty
- Orthopedic Back Surgery
- Pulmonology Medical



And Blue Cross Blue Shield recognized Ingalls for excellence in knee and hip replacement, and maternity with its Blue Distinction program.

Welcome New Doctors to the Neighborhood



FRANCIS L. HOBSON, M.D., is a noted

otolaryngologist and head and neck surgeon who recently joined the Ingalls medical staff. Dr. Hobson earned his medical degree at UCLA School of Medicine and completed his surgical internship at Howard University Hospital in Washington, D.C. He completed

an otolaryngology-neurotology and skull-base fellowship at Fairview University Medical Center in Minneapolis. He is certified by the American Board of Otolaryngology.



JAIME BAYLOCK, D.O., board-certified nephrologist, has joined Horizon Healthcare Associates located in the Flossmoor Family Care Center. Dr. Baylock received her medical degree from Loyola University Stritch School of Medicine. She completed a residency in internal medicine at North Shore

University Health System in Evanston, and a fellowship in nephrology at the University of Chicago.



KRIS SIEMIONOW, M.D., F.A.C.S.,

is Chief of Spine Surgery and Assistant Professor of Orthopaedics and Neurosurgery at the University of Illinois in Chicago. Dr. Siemionow completed a residency in orthopaedic surgery at the Cleveland Clinic. He completed fellowship training

in Adult Spine Surgery at Rush University Medical Center and a pediatric spine fellowship at the Shriners Hospital for Children. Dr. Siemionow is certified by the American Board of Orthopaedic Surgery. He is currently in practice with the Illinois Spine & Scoliosis Center with an office in Tinley Park.



ANTHONY RINELLA, M.D., a board-certified Spine Surgeon and founder of Illinois Spine & Scoliosis Center, joins the Ingalls medical staff. He attended medical school at the University of Illinois College of Medicine and completed his residency at Northwestern University. He went on to complete a

fellowship in adult and pediatric spinal surgery at Washington University in St. Louis. His office is located in Tinley Park.



JOHN ANDREONI, M.D., recently joined the Ingalls medical staff as an infectious disease physician. A graduate of Loyola University Stritch School of Medicine, Dr. Andreoni completed his residency and internship at University of Michigan Medical School (Ann Arbor, MI) and a fellowship at University of

Iowa Hospitals and Clinics (Iowa City, IA). Dr. Andreoni is a member of Southwest Infectious Disease & Internal Medicine.

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Mastectomy and Immediate Reconstruction a Winning Combination for Indiana Woman

Sharon Billo of St. John, Ind., has had breast cancer surgery twice in the last 10 years. The first was in 2005, when she had a lumpectomy to remove a tumor in her right breast, followed by a course of radiation therapy.



Dr. Gary Peplinski



Dr. Matthew Endara

Unfortunately, a decade later, the cancer came back — this time in both breasts. Cancer surgeon Gary Peplinski, M.D., recommended a bilateral mastectomy, or removal of both breasts, to eliminate the possibility of a future recurrence.

"I was on the fence for a long time," Sharon admits. After considerable thought and research, she agreed to the surgery in August 2014.

The first procedure involved removal of both breasts by Dr. Peplinski and the immediate insertion of temporary breast implants — or expanders by plastic/reconstructive surgeon Matthew Endara, M.D., to begin the reconstruction process.

Since the skin of Sharon's right breast had been compromised from previous radiation therapy, doctors recommended several sessions of

hyperbaric oxygen therapy to rejuvenate the damaged tissue with pure oxygen before proceeding with additional reconstruction of her breasts.

Several months later, Sharon underwent the insertion of a newer type of "form-stable" implants that are filled with gel and retain their shape better. After Sharon healed, Dr. Endara performed the final phase of the reconstruction process, an innovative technique called "fat grafting." Fat grafting, also called autologous fat transfer, is emerging as a new breast reconstruction technique, and Ingalls is at the forefront of this trend. During fat grafting, fat tissue is removed from other parts of the body and then processed into liquid to recreate the breast.

With breast cancer behind her, the retired vocalist who once entertained local restaurant audiences with classics like "Fly Me to the Moon" and "Somewhere Over the Rainbow," enjoys spending time with her husband, grown daughter and



Songstress Sharon Billo serenades her 93-year-old mother Catherine Inucci in this undated photo.

INGALLS LUNGS FOR LIFE Early Lung Cancer Screening and Smoking Cessation Program

According to the American Cancer Society, lung cancer is the leading cancer killer in both men and women in the United States. A recent National Cancer Institute study shows that giving eligible smokers low-dose CT scans can detect lung cancer early enough to lower risk of death by as much as 20 percent.

Participation in lung cancer screening CT scans at Ingalls is based on Medicare's beneficiary eligibility criteria. Participants:

- Must be between 55 and 77 years of age
- Must be asymptomatic with no signs or symptoms of lung cancer
- Must have a tobacco smoking history of at least 30 pack-years (one pack year is one pack per day for one year; one pack — 20 cigarettes
- Must be a current smoker or one who has quit smoking within the last 15 years; and
- Must receive a written order from a physician for a low-dose CT lung cancer screening.

For more information about Lungs for Life at Ingalls, call 708.915.LUNG (5864) or visit Ingalls.org/LungsforLife.

TrueBeam offers Pinpoint Precision for Patient with Vocal Cord Cancer



Donald Williams' treatment team included, from left, Kassie Kratowski, RT; Dr. Sulochana Yalavarthi; and Mary Kay Hommes, R.N.

If you've ever wondered how the two massive white antennas found their way to the top of the former Sears Tower in Chicago, look no further than the South Suburbs of Chicago.

Eighty-five-year-old Donald Williams of South Holland helped put them there.

He also rode the antennas to the top of the John Hancock building and helped set the Picasso in place in Chicago's iconic Daley Plaza.

The fearless Donald, a retired structural ironworker, has countless stories to share about his colorful life as an ironworker, artist, husband, father and grandfather.

More recently, he has another story to tell: this one about his fight with cancer of the vocal cords. And like his other tales, Donald's story is marked by courage, tenacity and his everpresent sense of humor.

"I was getting hoarse a lot," he remembers. "Eventually, I lost my voice entirely. A lot of people were grateful for that."

But all kidding aside, when Donald, a former smoker, described his symptoms to his primary care physician Lokesh Chandra, M.D., he was referred to an ear, nose and throat specialist on staff at Ingalls Memorial Hospital. A scope procedure confirmed the presence of a growth, so Donald was sent to radiation oncologist Sulochana Yalavarthi, M.D., who diagnosed him with vocal cord cancer and recommended radiation therapy at Ingalls.

Symptoms of vocal chord cancer, which affects 10,000 Americans each year, include a sore throat, a sensation of something stuck in the throat, voice changes, trouble breathing, trouble swallowing with associated weight loss, and the appearance of one or more lumps in the neck.

"Vocal cord cancer is very closely linked with a history of smoking," Dr. Yalavarthi explained.

Treatment varies depending on the location and size of the tumor but often includes surgery and radiation therapy.

In Donald's case, Dr. Yalavarthi recommended a very special type of radiation therapy using the highly advanced TrueBeam radiation therapy system at Ingalls.

The TrueBeam linear accelerator aims a more precise, higher-dose beam of radiation that is shaped to the cancerous tumor.

The sophisticated system delivers radiation treatment in a fraction of the time of traditional radiation therapy while protecting surrounding healthy tissue. That's especially important when treating tiny structures like the vocal cords.

What's more, the enhanced precision gives physicians added confidence when they're working adjacent to critical structures such as the spinal cord or base of the skull, and the fast delivery rate is particularly good for patients requiring high-dose treatments.

"A procedure that once took an hour can be done in a fraction of the time," she added. "Patients are more comfortable, less tired, and it's easier to maintain the right position to get the dose where it's needed."

A grateful Donald received twice-daily radiation treatments on his vocal chords for a month and a half, and five stereotactic body radiation treatments on a nodule in his right lung for two weeks. Today, he's cancer free.

In fact, he was so delighted with the care and treatment he received at Ingalls that he donated an original bronze sculpture he named "Why" to the Radiation Therapy Center, where it proudly sits in the waiting room.

"I love those people there," he adds. "They did a magnificent job for me. Besides, they're beautiful young ladies, and that might have had something to do with it too."

Ingalls Treating HER2-Positive Breast Cancer with Targeted Therapies

While breast cancer is often discussed as a "general" condition, in reality, there are several different types of breast cancer some more lethal than others.



About 25 percent of all breast cancers are HER2-positive (meaning the cancer is fueled by an over-production of the human epidermal growth factor receptor 2 protein).

"Cancers that have this overexpression are typically larger, spread quickly to lymph nodes, and are often not responsive to hormonal therapy marking a more aggressive type of breast cancer," explains James

Dr. James Wallace

Wallace, M.D., board-certified hematologist/oncologist on staff at Ingalls Memorial Hospital.

Before the late 1990s, women with HER2-positive breast cancer had poorer survival rates. Today, however, as more patients receive targeted therapy, this is no longer the case.

"Researchers better understand what fuels HER2-positive breast cancer, and the discovery of targeted therapies has now made a very difficult-to-treat breast cancer one of our most treatable!" Dr. Wallace said.

Bertha Shavers of South Holland was diagnosed with HER2 breast cancer after finding a "pimply bump" on her right breast last summer.

Shavers, a 71-year old mother of two, was due for a mammogram, so the timing was perfect. When her results came back, Bertha was referred to Dr. Wallace, who diagnosed her with Stage IIa breast cancer.

Dr. Wallace shared that when he first met Bertha she was very reluctant to do chemotherapy and was anxious about participating in a clinical trial.

Then he explained that Ingalls, which in 2014 was one of five community hospitals to win a prestigious national award from the Conquer Cancer Foundation for it's unique participation in over 50 nationally sponsored clinical trials, was participating in a trial sponsored by the National Surgical Adjuvant Breast and Bowel Project (NSABP) for women "just like her."

Dr. Wallace promised Bertha her participation would be closely guarded by a team of expertly trained nurses and physicians dedicated to safety, and after doing some research of her own and consulting with her two adult children, Shavers agreed to participate.

"Hormonal therapy given with chemotherapy drugs could shrink a patient's tumor even more before surgery and might influence our ability to do smaller surgeries, with less side effects, for patients like Ms. Shavers," Dr. Wallace explained. "Her tumor shrunk by nearly half before surgery, so her response to the treatment has been excellent."

In fact, she traveled shortly after surgery last December and continues a busy schedule as a Sunday school teacher at her church and as a prison minister for the Department of Corrections.

"I'm doing very well," she adds. "Every day's a good day. And I'm so grateful to my doctors at Ingalls. God has blessed me throughout this whole thing."

As for advice to other women, she adds, "Check your breasts regularly. Check them in the bath or shower. Be vigilant. The body is wonderfully made. It will let you know when it's breaking down."

For more information about breast cancer treatment or cancer clinical trials at Ingalls, call 780.915.HOPE (4673).



Bertha Shavers enjoys a sunny day in her garden.

Mother and Daughter Face Cancer Together

With busy work and family schedules, most moms and daughters welcome any opportunity to catch up over lunch. Cindy Ivin of Dyer, Ind., and Judy Trnka of Tinley Park are no different, especially when time permits.

In 2013 and early 2014, the loving pair enjoyed each other's company at the Ingalls Infusion Center in Tinley Park, where for a period of time, both were undergoing chemotherapy treatment for cancer.

Daughter Cindy, 47, was diagnosed with an aggressive form of breast cancer the day before Thanksgiving, 2013; mom Judy, 73, found out she had non-Hodgkin's lymphoma the year before. The effervescent wife and mother of two teen boys hosted Thanksgiving dinner the very next day without a hitch.

When Cindy finally broke the news to her family, Judy who had been bravely fighting her own battle with cancer, gave her daughter some motherly advice: Make an appointment with Dr. Kozloff.

"There was never any question which doctor Cindy would see," Judy explained. That's because Mark Kozloff, M.D., hematologist/oncologist and Medical Director of Ingalls Cancer Care, is not only a leading cancer expert, he's a trusted and beloved "family member" who's overseen Judy's cancer care since her diagnosis in 2012.

"Their situation wasn't easy," Dr. Kozloff admits. "But these two ladies remained positive throughout."



"Dr. Kozloff is a wonderful human being," Judy adds. "Cindy and I absolutely love him and can't say enough good things about him — and the nurses at the Infusion Center too. The entire team is wonderful."

Dr. Mark Kozloff

breast reconstruction surgery. Today, she is in remission.

underwent a double mastectomy and

Following chemotherapy, Cindy

Judy, who recently experienced a relapse of her cancer, has enrolled in a clinical trial at Ingalls at Dr. Kozloff's urging. Today, she's in remission too.

Cindy and Judy remain as close as ever and have newfound admiration for the courage and grace each displayed during one of the most trying times of their lives.

"Cindy has walked through this with such strength," Judy says, "She always remained positive and a great mom to her boys."

"My mom really is my hero," Cindy chimes in. "She was there for me every step of the way. We gave each other strength."



Cindy Ivin (left) and Judy Trnka

And though neither ever wanted to face cancer, facing it together helped make each of their journeys just a little bit easier.

Ingalls First in Nation in Groundbreaking 'Sandpiper Study'

This past spring, Ingalls became the first hospital in the nation to enroll a woman with metastatic breast cancer in the groundbreaking new Sandpiper Taselisib Clinical Study (G029058).

The national Phase III study compares the good or bad effects of the investigational drug taselisib with fulvestrant (versus placebo with fulvestrant) on women with advanced estrogen receptor-positive (ER+) breast cancer.

"Taselisib is an investigational drug in tablet form that blocks a pathway (called the PI3K pathway), which cancer cells use to grow and divide," explains Mark Kozloff, M.D., medical director of Ingalls Cancer Care.

Dr. Kozloff enrolled the very first U.S. patient at Ingalls in May. Approximately 600 women will take part in the study nationally.

For more information about the Sandpiper Study — or more than 50 other clinical trials available at Ingalls — call 708.915.HOPE (4673).



Listen to Your Body: Women's Heart Attack Symptoms Can Be Subtler than Men's

For Kathie Bodza, 53, the first sign of an impending heart attack wasn't crushing chest pain. In fact, it wasn't heart-related at all.

It was a headache that wouldn't go away.

Kathie's sudden and unexpected health crisis began one day in mid-March as she sat down to have lunch at work.

"All of a sudden, I felt like my head was a pressure cooker," she remembers. "I thought maybe it was the start of a sinus infection. I took an acetaminophen, and it subsided."

But it didn't go away entirely. After work, Kathie went home and lay on the couch to see if rest would bring relief. It didn't.

Instead, when she finally settled in, she noticed pain behind her left shoulder blade.

"I just couldn't get comfortable," she explains. "I sat in a chair and fell asleep for about 45 minutes."

Later that evening, when her symptoms persisted, she had an inkling something more serious was going on. Instead of calling 9-1-1, she decided to drive herself from her home in South Holland to the Ingalls Emergency Department to be checked out.

"I honestly didn't think it could be a heart attack," she said. "There was no chest pain, no feeling of indigestion, just the headache and pain behind my shoulder blade."

When doctors in the ED evaluated Kathie, they delivered the shocking news that what she actually experienced was a heart attack. "When the doctor told me, I just started bawling," she said.

The next morning, interventional cardiologist Ripple Doshi, M.D., discovered two severely blocked coronary arteries during an angiogram. He performed an angioplasty to reopen the arteries and implanted stents to keep them open.

Though initially she was in denial, Kathie admits she had several important risk factors for heart disease: She's a smoker; she's a diet-controlled diabetic, and both her parents have had coronary artery bypass surgery. She was also under a lot of stress leading up to the heart attack.

Today, Kathie's eating healthier, exercising several times a week and has cut her smoking habit in half with plans to quit altogether. She recently completed cardiac rehabilitation at Ingalls and has worked with a dietitian to choose hearthealthy foods.

"My advice is listen to your body," she adds. "When something is out of the norm, get it checked out. Looking back, I've had feelings of indigestion before, but I never thought is was leading up to a heart attack."

Thankfully, Kathie's story has a happy ending, but not everyone's does. In fact, heart disease has claimed the lives of more women than men in the United States for the last 30 years.

One reason is that many women still view heart disease as a man's problem. Another is presentation of symptoms. Unlike the chest-clutching scenarios we've all seen in movies or on TV, women's symptoms can be subtler like Kathie's, and may include indigestion, severe fatigue, shortness of breath and flu-like symptoms.

"The key to surviving a heart attack is getting immediate medical treatment," Dr. Doshi explains. "Early intervention can mean less damage to the heart muscle, a better chance that a blocked artery can be reopened and a greater likelihood for survival."

7 Ingalls HEARTAWARE

Determine Your Risk

To determine your personal risk of heart disease, Ingalls offers HeartAware, a free online risk assessment. Simply go to www.Ingalls.org/HeartAware. HeartAware takes less than seven minutes and can be completed right in the comfort of your home or office. A printable report is available upon completion and includes information about your risk factors as well as easy-to-read educational material about how to stay heart-healthy.

Valuable Free Testing

If your HeartAware assessment reveals three or more risk factors for heart disease, you are eligible to receive a free health screening that includes a full lipid profile, an HB A1c test for diabetes risk and measurements of blood pressure, body mass index and waist circumference. Afterwards, an Ingalls nurse navigator will follow up to discuss your results and make a plan to minimize your future risks for heart disease.

Ingalls Emergency Department Has Shortest Wait Times



Dr. Saif Nazir

Ingalls recently was recognized as having the shortest emergency department wait times out of Cook County's 10 busiest ERs, according to the October 2015 edition of *Chicago* magazine.

In fact, of the more than 103,000 ER visits to Ingalls in 2014 including the hospital and its three Urgent Aid facilities, Ingalls patients waited, on average, only 11 minutes before they were seen by a doctor or nurse, nearly half the wait of the next lowest hospital.

"We use a 'direct-to-bed' approach that allows patients to be triaged in an emergency department bed," explains Ingalls Emergency Department Chairman Saif Nazir, M.D. The Ingalls Emergency Department and Urgent Aid Centers implemented this approach several years ago thanks to the innovative and ongoing work of a multidisciplinary patient-flow committee that includes representation from several key hospital departments. As a result, Ingalls has experienced what few hospitals have: decreasing wait times and rising satisfaction scores for several years running.

At most hospital emergency departments, long wait times are caused by patient-flow problems. When delays occur in any area of the hospital, e.g., X-ray, lab, patient care units, ER patients get the brunt of it. But not at Ingalls.

"Every department in the hospital has to be on the same wavelength," adds Paul Zielske, Director of Patient Care Services. "If we can't move a patient out of the ER, we can't bring another one in." Another timesaving factor has been the addition of documentation specialists or scribes in the Emergency Department and Ingalls Urgent Aid Centers. By handling documentation responsibilities and scheduling diagnostic tests, the scribe frees the doctor to focus on the needs of patients, give more thought to complex cases, better manage patient flow through the department, and see patients on a timelier basis.



"Sixty percent of inpatients come from the Emergency Department," adds Kathy Mikos, DNP, RN, Vice President for Patient Care Services. "We view the Emergency Department as the front door of our organization. By helping to expedite the overall experience, we're showing another level of commitment to our patients."

Finally, Ingalls implemented InQuicker, which allows patients to choose the time they'd like to be seen at the

Kathy Mikos

hospital or the Urgent Aid Centers and then wait in the comfort of their homes before their scheduled appointment.

All of these factors add up to timely emergency treatment across the board.

"We've created a culture at Ingalls where every employee owns this process," Mikos added. "Our goal is to be the best Emergency Department in the South Suburbs."

Are You Getting Enough Vitamin D? Ingalls Offers Simple Test to Find Out

Chances are, if you live in the northern part of the United States, you don't get enough vitamin D. That includes the Chicago area.

In fact, if you routinely shun the sun, avoid milk or dairy and adhere to a strict vegan diet, you may be at risk for a potentially serious condition called vitamin D deficiency.

Others at risk include African-Americans and other darkskinned people; older people; overweight individuals; and people who work indoors. That's a lot of people!

In fact, researchers estimate that worldwide, vitamin D deficiency affects nearly a billion people and can be found in all ethnicities and age groups.

"Vitamin D plays an important role in bone health," explains Kaveh Rahmani, D.O., family practice doctor on staff at the Ingalls Care Center in Crestwood.

Also known as the "sunshine vitamin" because the body converts sunlight into vitamin D when the sun hits unprotected skin. Vitamin D also helps bring calcium and phosphorus to the bones and teeth; regulates how much calcium remains in the blood; helps strengthen the immune system; and aids in regulating cell growth.

"People who don't get enough vitamin D may have greater loss of bone mass, which can lead to osteoporosis," he added. "Vitamin D deficiency is also linked to softening of the bones."

Other risks include an increased chance for developing chronic diseases like heart disease, some cancers and multiple sclerosis.

The recommended dietary allowance for adults is 600 IU of vitamin D a day. That goes up to 800 IU a day for those older than age 70.

Since vitamin D is naturally present in very few foods, it is added to many and is also available as a dietary supplement. Some oily fish, such as tuna and salmon, naturally contain vitamin D. Most milk and many types of orange juice, yogurt, cheese, cereal, bread and soy drinks are fortified with vitamin D. Check the Nutrition Facts panel for vitamin D.



Ready to care for you in Crestwood. From left, family nurse practitioner, Quiana Jackson, BSN, MSN, FNP-BC; Kavitha Bathala, M.D.; and Kaveh Rahmani, D.O.

Vitamin D Testing

Although bone pain and muscle weakness may be signs of a vitamin D deficiency, for most individuals, the symptoms are extremely subtle. The only way to know if you're deficient is to have a vitamin D test.

"The most accurate way to measure how much vitamin D is in your body is the 25-hydroxy vitamin D blood test," adds Crestwood family practice specialist Kavitha Bathala, M.D.

A level of 30-100 nanograms/milliliter is considered adequate for healthy people, and an optimal level is about 70 ng/mL. A level less than 12 ng/mL indicates vitamin D deficiency. Treatment for vitamin D deficiency involves getting more vitamin D through diet and supplements.

"If you don't spend much time in the sun or are always careful to cover your skin (sunscreen inhibits vitamin D production), you should speak to your doctor about taking a vitamin D supplement, particularly if you have risk factors for vitamin D deficiency," Dr. Bathala added.

Ingalls Quick Care in Crestwood is located at Cal Sag Road at Cicero. Hours are Monday through Friday from 8 a.m. to 8 p.m., and Saturday and Sunday from 8 a.m. to 4 p.m. For more information, call 708.915.ASAP (2727).

New Drug-Coated Angioplasty Balloon is Treatment of Choice for Peripheral Artery Disease

Candice Willis suffered from leg pain so severe she could barely walk.



Dr. Cyrus Akrami



Dr. Abed Dehnee

Candice, a former pack-a-day smoker, had other troubling symptoms too, including, numbness and spasms in her foot and toes. It all added up to debilitating discomfort and an inability to do her job.

But a novel treatment available at Ingalls that uses an anti-proliferative cancer drug on a balloon reopened the artery and put an end to her troubling symptoms once and for all.

Earlier this summer, Candice's employer told her she needed to see a doctor before she could return to work. Her primary care physician Cyrus Akrami, M.D., quickly recognized her symptoms and referred her to interventional cardiologist Abed Dehnee, M.D.

"I've been experiencing leg pain for the past two years," Candice explains.

"This year, it really started to get worse. Heating pads helped a little when I got home, but by the time I got to work, the cycle would start all over again."

Dr. Dehnee ordered an arterial Doppler test of Candice's legs. And what he saw confirmed his suspicions: Candice had severe peripheral artery disease (PAD) in the superficial femoral artery of her right leg.

PAD, which affects eight million Americans, narrows arteries in the legs, limiting blood flow to the muscles. Risk factors include diabetes, abnormal cholesterol, cigarette smoking and high blood pressure. Muscle pain, called claudication, typically comes on with exercise, and is relieved with rest.

"PAD is most common in older patients," Dr. Dehnee explains. "It was unusual for someone her age."

Dr. Dehnee immediately scheduled Candice for a peripheral angiogram in mid-August, through which he discovered Candice's leg artery was 100-percent blocked.

To reopen the closed blood vessel, Dr. Dehnee used a special technique called atherectomy to remove plaque from inside the artery. Then, for the very first time at Ingalls, he performed drug-coated balloon (DCB) angioplasty. The medication coating the balloon, paclitaxel, is an antiproliferative drug used to block the growth of certain types of cancer. Researchers found it also helps prevent reblockage after an artery has been opened.

"DCB is similar to plain angioplasty but with the addition of the medication that helps keep an artery open," he said.

"At the end of the procedure, Mrs. Willis had excellent blood flow once again in her right leg and very good pulses in the foot," Dr. Dehnee said. "I saw her a week later, and her pain had completely resolved."

Candice, who had been a heavy smoker, gave up the habit and has committed to eating healthier to reduce other cardiovascular risk factors. And with her leg pain behind her, she's back to work and plans to start walking for exercise something she couldn't do before.

"I feel so much better," she said. "My leg pain is gone. I would definitely recommend Dr. Dehnee and Ingalls."



Following successful treatment for a blocked leg artery, Candice Willis is back on her feet and doing what she loves.

Taking Off the Mask:Expressive TherapyHelps Patients Dealwith Painful Feelings

Masks are worn for a lot of reasons: for disguise, for protection or for entertainment.

Believe it or not, we all wear masks to cover our feelings from time to time. Some of us do it dozens of times a day.

"People don't often realize they put on masks when interacting with others," explains Aimee Gornick, LCPC, counselor with the Ingalls Behavioral Health Intensive Outpatient Program (IOP) in Tinley Park.

We may wear masks when we're working, meeting new people or even parenting. Depending on the situation, they may help us appear smarter, stronger and more in control.

"Masks protect us," adds Jennifer Brown, LCSW. "But they can also make it difficult for us to develop healthy and meaningful connections with others."

To help IOP patients break down barriers, get in touch with their feelings and learn successful coping strategies, Brown and Gornick use a highly effective form of expressive group therapy that involves...creating a mask.

Patients carefully choose colors and words to adorn the outside of their masks, e.g., a smiley face with adjectives like "happy" and "lovable." This is the face they routinely show the world around them.

The inside of the mask, however, usually reveals something entirely different.

"Patients may draw a sad face and label it with descriptions like 'sad, depressed or hopeless," Brown explains, "which reflects what's really going on inside."

"The exercise is about building connections in a safe, therapeutic setting," Gornick added.

IOP patients may have deep-seeded reasons to cover up their feelings. They may be hiding past abuse, grief, loss or physical illness. And without a proper emotional outlet, they simply cover up and show a different face to the world around them.

"Talking about painful experiences isn't easy," Brown said. "And not everyone is ready to confront the pain."

The mask exercise allows people to unburden their feelings and fears in a secure environment where they won't be judged — and with others who are equally adept at shielding their emotions. When they're done creating, each presents his or her mask to the group and explains what it represents.

"The exercise opens their eyes, minds and emotions and gives them some insight about what they're holding in and what they need to do to move on in a healthy way," Gornick said.

Expression is just one type of therapy offered to IOP patients. Other therapeutic modalities include cognitive therapy, behavioral therapy, emotion regulation therapy, relaxation techniques, social skills training and medication monitoring. The program treats individuals in crisis as well as those in need of long-term support. Most participants attend sessions three days a week for at least eight weeks, although treatment varies by an individual's needs.

Intensive Outpatient Program



"The IOP offers a mid-level of care to patients experiencing depression or difficulty coping related to physical illness, job loss, divorce, the death of a loved one or financial difficulties," explains psychiatrist Joseph Beck, M.D., medical director of the program. "It keeps them out of the hospital so they can work or go to school, but it gives them intensive therapy to help them gain healthy coping skills."

Dr. Joseph Beck

At the time of admission, patients are assigned an individual therapist and schedule a meeting with Dr. Beck for medication monitoring once every two weeks, or once a week if needed. Group sessions comprise a major part of the program and offer individuals a way to come to terms with their difficulties with others who truly understand where they're coming from.

The IOP's multidisciplinary treatment team of experts includes a psychiatrist, licensed clinical therapists, a registered nurse and a program assistant.

A physician referral may be required to receive intensive outpatient services. For more information or to schedule a no-charge assessment, call 708.915.7500.

The new IOP is located at Ingalls Family Care Center, 6701 W. 159th St., Suite 2, Tinley Park.

Tight Control of Diabetes is the Key

When 56-year-old Rich Wojtas was diagnosed with type 2 diabetes in 2014, first he was "in denial," then he felt fear.

"My dad had the same thing," he remembers, "and he was about the same age."

Eventually, complications from diabetes led to his father's premature death at 56.



"My mom has it too, but she's doing well," he adds. "She manages it."

"Tight control of your diabetes really is the key," explains Kim Kramer, R.D., CDE, registered dietitian and certified diabetes educator with the Ingalls Diabetes Management Center in Flossmoor.

Rich is a great example of how keeping diabetes in check can not only stave off future complications, it can also lead to a healthier lifestyle overall.

Since he was diagnosed, the fitness-minded Hegewisch resident watches what he eats, gets a lot of physical activity and has lost 15 pounds. To keep his routine interesting, Rich runs, uses the stationary bike, stepper and also enjoys martial arts. In fact, the energetic IT supervisor is well on his way to earning a black belt in Kenpo karate.

While he's delighted with the progress he's made, Rich is especially proud that his strict control of his condition means he no longer has to take his oral diabetes medication.

For added support, the reformed "junk-food junkie" meets with Kramer about every six months.

"It's a lot of work, but it's so worth it," he adds. "If you have diabetes, you've really got to help yourself."

How Diabetes Damages the Body

Did you know that diabetes can take a toll on nearly every organ in the body?

"Diabetes increases your risk for many serious health problems," explains Kim Kramer, R.D., CDE, at the Ingalls Diabetes Management Center in Flossmoor.

The good news is that with the correct treatment and recommended lifestyle changes, many people with diabetes are able to prevent or delay the onset of complications.

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The heart: Heart disease and blood vessel disease are common problems for many people who don't have their diabetes under control. In fact, diabetics are twice as likely

to have heart problems and strokes as those who don't.



The eyes: Diabetes is the leading cause of new vision loss in the U.S. among adults ages 20 to 74. Diabetes-related eye problems — some of which can cause

blindness if not treated — include glaucoma, cataracts and diabetic retinopathy.



The kidneys: Diabetes is the leading cause of kidney failure in the U.S., accounting for nearly half of all new cases in adults.



The nerves: Over time, elevated blood sugar levels can damage the nerves. In fact, as many as seven out of 10 diabetics experience diabetes-related nerve damage.

Peripheral diabetic neuropathy can cause pain and burning or a loss of feeling in the feet and other body parts. Autonomic neuropathy is caused by damage to the nerves that control the body's internal organs and can result in many significant problems.



The skin: Problems with the skin, including bacterial infections, fungal infections and itching are sometimes the first sign that a person has diabetes. Other skin problems

include diabetic dermopathy, acanthosis nigricans and others and happen mostly or only to people with diabetes.



Support for Diabetics

Led by Kim Kramer, R.D., CDE, registered dietitian and certified diabetes educator, the Ingalls Diabetes Forum meets at the Ingalls Diabetes Management Center in Flossmoor. Featuring guest speakers each month, the group focuses on topics like basic glucose monitoring, insulin and oral medications, physical activity and how to avoid complications.

The Ingalls Diabetes Forum is a free program that meets the last Monday of every month from 6-7pm. Registration is required. Call 708.915.8850 for more information.

Restoring the Sounds Around You

Hearing loss is much more common than you might think. Nearly one in five adults in the United States — 48 million — report some degree of hearing loss; and at age 65, one in three is affected.

Jackie Medley of Tinley Park is among them. But it hasn't cramped her style. The 88-year-old dynamo volunteers at the Ingalls Infusion Center in Tinley Park every week. She also travels, snorkels, kayaks, fishes and walks whenever she can.

Two hearing aids from the Ingalls Audiology Center keep the retired teacher and great-grandmother of eight communicating well with the world around her. "There's a stigma to hearing aids," Jackie explains. "But the hearing aids of today aren't your grandma's hearing aids."

On the contrary, they are tiny, high-tech masterpieces that fit discreetly in the ear, providing wearers with a much more advanced listening experience. "Hearing aid technology has made significant changes over the past several years and continues to evolve," explains Mary Lou Dovantzis, M.S., CCC-A, licensed and certified audiologist with the new Ingalls Audiology Center located in the Ingalls Care Center in Flossmoor.



Audiologist Mary Lou Dovantzis with Jackie Medley

Studies show hearing aids help the wearer feel more independent and secure, have a better relationship with family and friends and improve concentration and mental health.

And for those on the fence about using a hearing aid, Jackie offers some final words of wisdom: "Don't be embarrassed. People use glasses for reading, and canes and walkers to move around. Hearing aids have certainly improved my quality of life, and they can improve yours too."



Comprehensive Hearing Services in Flossmoor

If you have been referred for a diagnostic audiologic evaluation, your doctor feels your hearing loss needs further examination. The evaluation is also indicated for individuals who did not pass an initial hearing screening.

At the Ingalls Audiology Center, all audiological services are performed by a state-licensed audiologist who holds a master's degree in audiology and is certified by the American Speech-Language-Hearing Association.

Audiological services include:

- Hearing evaluations adult/pediatric/newborn
- Videonystagmography (VNG) for balance testing
- Tympanometry testing to detect fluid in the middle ear, perforation of the eardrum, or wax blocking the ear canal
- Oto-acoustic emissions (OAE) testing to detect a blockage in the outer ear canal, as well as the presence of middle ear fluid and damage to the outer hair cells in the cochlea
- "Real" ear testing for measuring hearing aid effectiveness
- Assistive listening devices, including FM systems/ listening systems and amplified phones
- Swim plugs and musician plugs
- Custom hearing protection
- Hearing aid services, including evaluations and consultations, hearing aid dispensing and repairs of all makes and models

For more information or to schedule an appointment, please call 708.915.8457.

Scoliosis Surgery Corrects Hazel Crest Teen's Spine Curvature

When then 14-year-old Lauren Clay and her mom were alerted to a curvature in Lauren's spine during her high school physical in 2013, they were concerned, but not overly so.

In fact, the condition was minor enough that it didn't even warrant a back brace. She visited her spine specialist every six months as a precaution.

But as time passed, Lauren noticed her clothes weren't fitting right. "My right hip stuck out further than my left, and my right back bone under the shoulder blade also looked out of alignment," she recalls. "It looked like I wasn't standing straight."

Then the back pain started, especially when she bent down to pick something up.

Late last year, when the pain became worse, Lauren's mom Venus made an emergency appointment. That's when they discovered Lauren had a spine curvature of nearly 50 degrees. A back brace was now out of the question; scoliosis surgery was the only solution. She was referred to spinal surgeon Srinu Kusuma, M.D., who specializes in scoliosis surgery.

"Scoliosis is a condition that causes the spine to rotate and curve sideways," Dr. Kusuma explains. "While there are several different types, the most common is 'idiopathic,' which means the exact cause is not known."

It's estimated that 7 million Americans have the condition; most cases occur between the ages of 10 and the time a child is fully grown. Girls are diagnosed with the condition twice as often as boys, and once a child hits a growth spurt during puberty, the most obvious signs are tilted, uneven shoulders, prominence of the ribs on one side, an uneven waistline and one hip higher than the other. Up to a third of all diagnosed cases are hereditary.

But that wasn't the case with Lauren, who has two older sisters who have never had the disorder.

After meeting with Dr. Kusuma, they scheduled surgery for June of this year, after Lauren completed her sophomore year of high school so she could have the summer to recover.

"I was really nervous about the surgery," Lauren admits. "I'd never been in the hospital before, but Dr. Kusuma was really helpful and gave me a great website to look at (www.srs.org) to get more information and read about others who had the surgery."



Dr. Kusuma shows Lauren before-and-after X-rays of her spine following surgery.

On June 12 of this year, Lauren underwent spinal fusion surgery at Ingalls. Dr. Kusuma used titanium rods and screws to realign Lauren's spinal bones and bone graft between the vertebrae to be fused. Over time, the bones fuse together, similar to when a broken bone heals.

Following surgery, Lauren spent six days at Ingalls, regaining her strength and mobility with the help of physical therapists. By the time she went home, she was walking on her own, but was told to avoid bending, lifting or twisting for up to a year while the fusion healed — not an easy task for an active teen.

"No 'BLT's,' they told me," she remembers with a grin.

Though she has to sit out marching band and track this year, she looks forward to both her senior year.



In the meantime, the very bright Homewood-Flossmoor high school junior enjoys her classes — especially math, science and engineering.

Most of all, she's glad her appearance is back to normal. Her spine is straight, and her hips are even.

"She's gotten a lot better," Venus adds. "Dr. Kusuma was really open throughout it all. He's there whenever we need him."

Progress

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Ingalls Progress is created to provide healthcare information to the residents of Chicago's South Suburbs.

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- > Ingalls Family Care Center, Flossmoor

(Governors Highway between Kedzie and Vollmer) 708.799.8400

- Ingalls Family Care Center, Tinley Park (159th St. east of Oak Park Ave) 708,429,3300
- > Ingalls Care Center, Crestwood

(Cal Sag Road at Cicero) 708.915.ASAP (2727)

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