

HARRISON

FALL 2008

# HEALTH



## **HIP HELP**

Active boomers rebound with the latest resurfacing procedure at Harrison

## **UNDER CONTROL**

How to measure and manage your blood pressure

## **DON'T PANIC**

There's help for panic disorder

**Q.** Does Harrison have a Zamboni®?



**A.** No, but we do have the region's only hip-resurfacing program.

**HARRISON**  
MEDICAL CENTER

**HEALTHCARE ANSWERS** — Harrison offers the latest hip replacement procedures, including minimally invasive techniques and state-of-the-art hip resurfacing, a viable option for younger patients whose active lifestyles have increased wear on their joints. If you're a baby boomer with hip pain, let's talk.

[harrisonmedical.org/answers](http://harrisonmedical.org/answers)

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Our Community Calendar is packed with local classes, support groups, and events.



**SEND SOME CHEER:** You can send a free cheer card or purchase gifts for Harrison patients online. We hand deliver! Visit [harrisonmedical.org](http://harrisonmedical.org), and click on "Patients/Visitors."

## HARRISON HEALTH

*Health* magazine is published by the Marketing & Communications Department as a community service for the friends and patrons of Harrison Medical Center. Material is intended to supplement—not replace—information received from your physician or other healthcare provider.

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HARRISON MEDICAL CENTER is a not-for-profit hospital and the region's largest medical center, with three campuses serving the Kitsap and Olympic peninsulas. With 400 physicians representing 40 specialties, we offer medical and surgical services, and 24-hour emergency care at two campuses. Harrison also serves as a regional center, providing specialized treatment in cardiovascular services, oncology, orthopedics, obstetrics and gynecology, and pediatrics. Harrison is a Level III Trauma Center.

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## PRESIDENT'S MESSAGE

# Innovation close to home

WHEN YOU THINK of innovation, you naturally think of new and better—a definite “wow” factor. At Harrison, one of our important core values, along with empathy and accountability, is innovation. We’re always searching for new

and better ways to improve our service, processes, and technical excellence.

This past summer, we had a “wow” factor of our own with the arrival of the



**Scott W. Bosch**

da Vinci® Surgical System.

We’re now part of a prestigious group, as there are only 650 da Vinci systems across the nation and only 850 total worldwide.

This \$1.7 million surgical robot provides our highly skilled surgeons with many enhanced capabilities, such as better visualization, precision, dexterity, and control.

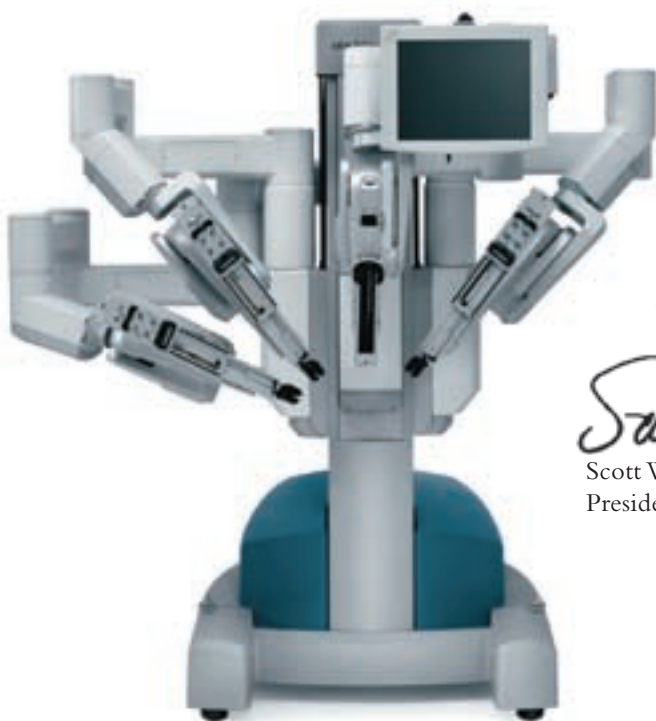
The da Vinci doesn’t take the place of the surgeon. It merely mimics the surgeon’s movements in real time. All the while, the surgeon retains direct control.

This robotic surgical system is a minimally invasive approach that uses tiny incisions (only 1 to 2 centimeters long) in a complex surgical setting. Harrison surgeons are using the da Vinci system for selected urological, gynecological, and general surgery procedures.

Our patients receive the full benefit of this marriage of robotics and surgical technology in myriad ways. Patients experience less pain, less blood loss, less risk of infection, shorter hospital stays, and faster recoveries. They’re also able to resume their daily activities sooner than with conventional surgical procedures.

We’re thrilled to bring our region the most advanced surgical capabilities close to home. Now that’s a “wow” factor.

Scott W. Bosch  
President and CEO



## Welcome, new providers

### Cardiology

Robin Houck, MD

### Emergency Medicine

Gilbert Ondusko, MD

### Family Practice

Darren Chotiner, MD

Sarah Rice, MD

Barbora Volovarova, MD

### Family Practice/Urgent Care

Dieter Eppel, DO

Caroline Brinkley, MD

### Internal Medicine

Robert Abernathy, MD

Edgar Galicia, MD

Ernest Kamara, MD

Hector Reyes, MD

Sarahi Rodriguez-Perez, MD

Chinweuba Ubani, MD

Safoora Zaka, MD

### Nephrology

Frederick Albrecht, MD

Namita Gill, MD

### Neurology

Kari Heber, MD

### Occupational Medicine

Bruce Christen, MD

### Orthopedics

Delisha Johnson, PA-C

Michael Thomas, MD

### Pediatrics

Rachel Anderson, MD

### Teleradiology

David Alexander, MD

Edward Lee, MD

Brandon Liu, MD

Nancy Shaffer, MD

### Urgent Care

Scott Reichard, MD



**GO:** Click on  
“Find a Doctor” at

**[harrisonmedical.org](http://harrisonmedical.org)** or call  
**360-692-4881** for a referral to  
one of Harrison’s more than  
**400 physicians.**

## Make the **most** of doctor visits

### Before your appointment

- 1 Write down questions you want to ask, starting with the most important.
- 2 List any symptoms or problems you're having. Be as specific as possible.
- 3 List your medications, along with dose and frequency. Include vitamins and nonprescription medicines.
- 4 Take the list with you to your appointment.

### At your appointment

- 1 Keep your questions to the point, and discuss your most important ones first.
- 2 Answer your doctor's questions honestly, even if they're personal or sensitive. Your doctor needs accurate information to help you.
- 3 Listen carefully and take notes to jog your memory later. If you don't understand something your doctor says, ask for an explanation.
- 4 Before you leave, ask how best to follow up if you need more information or have questions later.

American Medical Association, [ama-assn.org](http://ama-assn.org); National Institute on Aging, [nia.nih.gov](http://nia.nih.gov)

## Where germs lurk

Office desks, phones, and keyboards can be hotbeds of bacteria. Keep your desk and other office items clean and germ-free by using disinfectant wipes occasionally.

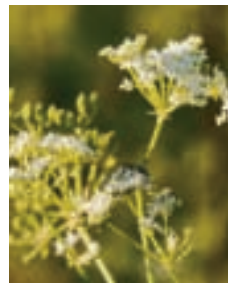


### A very cool idea

To help keep a lunch from spoiling, pack a frozen box of 100 percent fruit juice. It will thaw gradually and keep food cool until lunchtime.

American Dietetic Association, [eatright.org](http://eatright.org)





## ALLERGIES

### That tissue time of year

When it's sneezin' season, your misery index may soar. But there are ways to control allergies even as pollen and mold float through the air.

Pollen and mold are common causes of allergy symptoms such as sneezing, congestion, a runny and itchy nose, watery eyes, scratchy throat, and itchy ears.

Medicines can help relieve symptoms and head off sinus and respiratory infections. But reducing contact with outdoor allergens is also important.

The American Academy of Allergy, Asthma & Immunology offers these tips:

- Keep track of pollen and mold counts. High counts are more frequent in spring and fall but can occur at other times of the year as well.
- Stay inside when the pollen count or humidity is high or if the day is windy.
- Limit outdoor activity between 5 and 10 am, when pollen is usually released.
- Close windows to prevent pollen and mold from drifting indoors. If needed, use air conditioning, which cleans, cools, and dries the air.
- Keep car windows closed when traveling.
- Don't mow lawns or be around freshly cut grass. Raking leaves also releases mold into the air.

 **GO:**  
Find out how to control your sniffles at [harrisonmedical.org/allergies](http://harrisonmedical.org/allergies). You also can check what's in your local air at [aaaai.org](http://aaaai.org). Click on "Pollen Counts."



## COORDINATED CARE

# Intensivists make a **critical** difference

OVER THE PAST 18 to 24 months, there has been a sharp rise in the number of Harrison patients who need advanced care for complex medical problems. In addition, the medical center has adopted new technologies and expanded services to care for an aging population of more acutely ill patients.

A group of Harrison physicians—called intensivists—has changed the way they provide care to meet these changing healthcare needs in the Intensive Care Unit (ICU).

### Leaders in care

Doctors from many specialties become trained intensivists, says Frederick P. Ognibene, MD, 2007 president of the Society of Critical Care Medicine. Some are surgeons or internal medicine doctors, while others are pediatricians or anesthesiologists.

But no matter what their background, intensivists are trained as team leaders, Dr. Ognibene says.

“We focus on treating the whole person,” he says. “That means working collaboratively with other physicians, nurses, respiratory therapists, pharmacists, and all types of other medical professionals.”

This model for care makes sense, Dr. Ognibene says, because people in intensive care often develop a complex combination of problems. Intensivists are trained to recognize these problems and work with other physicians to treat them.

Intensivists also help family members understand what’s happening with their loved one by answering questions, addressing concerns,

and helping them to receive support from social or mental health workers, or clergy, if necessary.

### Round-the-clock efforts

At Harrison, six intensivists share an ICU schedule to provide support and services in the unit and on-call 24 hours a day, seven days a week.

“We have a fixed number of patients that we focus on and for whom we are able to provide acute bedside management,” says intensivist Steven Bennett, MD, medical director of Harrison’s ICU. “We also tend to be more

**Intensivists at Harrison are available to offer collaborative, consistent care to ICU patients 24 hours a day.**

involved with families because we are on-site for up to 14 hours a day.”

That on-site presence—coupled with the specialty training—makes a dramatic difference in patient care.

“Intensivists are uniquely qualified to decrease the length of time a patient stays in the ICU,” Dr. Bennett says. “Because intensivists are at the bedside for longer periods, they can manage patients more aggressively.”

For example, an intensivist may be able to coordinate care in a way that allows a patient to be removed from a ventilator sooner. A shorter stay in the ICU opens up access to critical care services for more patients. It also decreases how long patients have to stay in the hospital overall.

## Harrison’s intensivist team

Kittredge Baldwin, DO  
Griffith Blackmon, MD, MPH  
David Corley, MD  
Roger Eagan, MD  
Benjamin Sy, MD



**Featured expert**  
**Steven Bennett,**  
**MD, medical**  
**director of**  
**Harrison’s**  
**Intensive Care**  
**Unit**



# Need medical care at school?

**FREEBIE!**  
Harrison  
offers free  
Consent to Medical  
Care and Treatment  
cards for school and  
family use. Call 360-  
415-6920 for yours.

FOR SOME KIDS, preparing for a new school year means more than stocking up on school supplies.

If your child has a chronic illness, such as asthma or diabetes, you'll need to plan ahead for any medical care your child may require at school.

It's important to work with your child's healthcare team and school personnel to ensure your child's safety. The American Academy of Pediatrics recommends that before school starts you:

**Meet with school staff.** Talk with your child's teacher and the school nurse about your child's condition. Provide written instructions from both you and your child's doctor.

These should include:

- A brief medical history.
- Your child's special needs, such as avoiding foods that trigger allergies.

■ Medication or procedures required during school hours.

■ Emergency plans and procedures, including contact numbers for you and your child's doctor.

**Gather forms and supplies.** You may need to provide the school with:

■ A consent-to-treat form. This authorizes giving medication and emergency treatment.

■ A release-of-information form. This gives the school nurse permission to call your child's doctor.

■ Medication and any other supplies (such as an inhaler). Provide an adequate supply of medication in pharmacy-labeled containers.

**Talk with your child.** Some children may feel embarrassed or anxious about having a health condition that requires medication or special equipment. Offer ways your child can respond to peers who may have questions.

## Backpack overload?

Your children may have backpack overload if they:

- ✓ Struggle to put the backpack on or take it off.
- ✓ Change posture while wearing the backpack.
- ✓ Have red marks on their shoulders.
- ✓ Feel tingling or numbness in their arms or legs.

## Kids carrying heavy loads

ONE THING you don't want a child carrying in a backpack is too much weight.

Backpacks that are too heavy or worn improperly can injure muscles and joints and cause back, neck, and shoulder pain, according to the American Academy of Pediatrics (AAP). A backpack should never weigh more than 20 percent of a child's body weight, says the AAP.

Here are ways you can help monitor your children's backpacks:

- Look for a backpack with two wide,

adjustable, and padded straps, and make sure your kids wear both straps.

■ Put heavy items close to the center of the back.

■ Teach your kids to bend at the knees, place one strap on at a time, and use their legs to lift the backpack.

■ Consider buying a backpack with wheels and a handle.

■ Try to limit the amount of time your children wear their backpacks.

FOR A DOZEN years, despite ever-increasing pain, Roberta Scott tap-danced across Port Townsend stages with the Fabulous Follies, an energetic group of women ages 25 to 85. She now dances pain-free.

An active 61-year-old, Scott attributes this welcome change to a hip-resurfacing procedure performed by Harrison orthopedic surgeon Donald Bliss, MD, in June 2007.

In the couple of years before the surgery, the pain in Scott's left hip kept her up most nights and caused her to limp. This frustrated Scott, who likes to walk and camp regularly and spends most of the day on her feet as a bank supervisor.

Three weeks after surgery, she participated in a 24-hour Relay for Life event; two months after surgery, she enjoyed an Alaskan cruise.

"There's not much that holds me down," Scott says.

### A life-altering procedure

Hip resurfacing is a surgical alternative to total hip replacement.

"The idea of doing a resurfacing is a very good one for younger, healthier patients," Dr. Bliss says. "Patients can experience activity levels as they are used to."

The procedure conserves valuable bone by covering the joint's surfaces with prosthetic implants rather than cutting away worn bone and replacing it, as is done in traditional hip replacement. The ball and socket are capped with metal devices made of a strong, high-carbon, cobalt-chrome alloy.

Dr. Bliss, a board-certified orthopedic surgeon trained in hip resurfacing, has performed nearly 50 of the procedures since 2005. He was one of the first orthopedic surgeons in Washington—and Harrison was among the first hospitals nationwide—to offer hip resurfacing using the British-designed Birmingham hip resurfacing system.

Hip resurfacing isn't a new procedure, having been performed for decades around the world, but it is new to the United States. The U.S. Food and Drug Administration (FDA) approved the Birmingham system in 2006.

## Why replace when you can resurface?

Hip resurfacing offers several important advantages, says Donald Bliss, MD, an orthopedic surgeon on Harrison's medical staff. The procedure:

- 1 Preserves more bone and gives patients more options for surgical revisions when the hip wears out.
- 2 Mimics the biomechanics of a natural hip, giving patients a better range of motion, as well as more stability and functionality.



### The right choice

Dr. Bliss has performed hip resurfacing on patients from ages 35 to 69, with most in their 50s and early 60s. General guidelines recommend hip resurfacing for men 65 and younger, and women 55 and younger.

However, considerations are made according to each individual case.

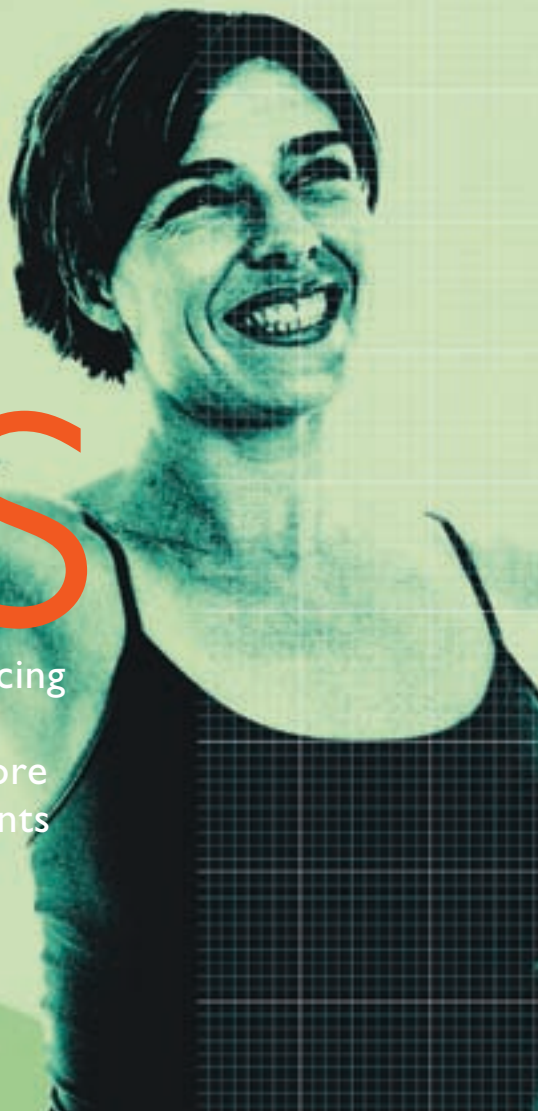
"A surgeon evaluates every patient to determine if they are a good candidate for the procedure," Dr. Bliss says.

For example, bone density is a consideration when evaluating women for the procedure. Dr. Bliss also says that there are advantages for older patients who are very healthy or active.

Mitch Morey, Sr., considered both hip replacement and resurfacing for the nagging pain in his left hip. He walked with a limp most of the time and rarely attempted water or snow skiing.

# help hips

Hip resurfacing  
can benefit  
younger, more  
active patients



## \* Harrison's orthopedic team

Monica Alberts, MD  
Gordon Cromwell, MD  
Gregory Duff, MD  
Larry Iversen, MD  
Christopher Kain, MD  
Kenneth Koskella, MD  
David Mourning, MD  
Christopher Olch, MD  
Christopher Rankin, MD  
Lynn Staker, MD  
Michael Thomas, MD  
Kent Van Buecken, MD  
Bradley Watters, MD  
Brian Wicks, MD



**Featured expert  
Donald Bliss, MD**

Hip resurfacing seemed a more natural process to the 49-year-old real estate agent who had the surgery at Harrison nearly 18 months ago.

Now 50, Morey can ride horses on his five-acre Port Orchard farm, a pleasure he'd given up three years before his surgery. He's also back to his favorite activities.

"I'm planning on it lasting forever," Morey says optimistically of his new hip. "It gets better every day."

### **What it is, what it isn't**

Dr. Bliss says that hip resurfacing is just one variation of hip surgery. He explains to patients that resurfacing carries the same risks, complications, and difficulties as traditional hip replacement. Recovery time—about four to six weeks—is the same.

"It's essentially hip replacement with a different kind of implant," he says.

A genetic degeneration and family history caused Vicki Hahn-Gillespie, a North Kitsap School District teacher, to have left hip replacement surgery two years ago. Her Seattle doctors then recommended that she also have the right hip replaced.

Instead, she researched hip resurfacing as an alternative and liked what she learned. Ten months ago, Dr. Bliss resurfaced her right hip at Harrison.

Hahn-Gillespie says that her hip replacement and hip resurfacing recovery times were similar. However, she's most impressed that her constant throbbing, aching hip pain is gone after resurfacing.

The 52-year-old Poulsbo resident now swims five days a week, hikes, gardens, kayaks, and camps. She also rides a scooter.

"I would never have tried to ride a scooter before," Hahn-Gillespie says. "Hip resurfacing has opened up a whole new avenue for me."



**GO: To learn  
more about**

**hip resurfacing,  
contact a Harrison  
orthopedic special-  
ist by calling 360-  
692-4881. You also  
can go to [harrison  
medical.org/services/  
orthopedics.php](http://harrisonmedical.org/services/orthopedics.php).**



# Blood pressure

Get yours under control

## How to manage BP

- ✓ **Lose weight if you are overweight.** Losing even 5 to 10 pounds can lower blood pressure.
- ✓ **Exercise.** Talk to your doctor before beginning any new exercise program.
- ✓ **Eat well.** You may need to add more fruits, vegetables, and whole grains to your diet and cut down on fats and salt.
- ✓ **Take medicine if needed.** If lifestyle changes don't bring your blood pressure down, you may need medication.

American Heart Association, [americanheart.org](http://americanheart.org); American College of Physicians, [acponline.org](http://acponline.org)

**N** O MATTER WHY you're in a doctor's office, someone is probably going to wrap your arm in that blood pressure cuff, inflate it until you feel the squeeze, and then tell you what your pressure is.

Why the constant push to measure your blood pressure?

Because the American Heart Association (AHA) reports that nearly one in three adults in this country has high blood pressure. That means many people are at risk for serious health problems—such as heart attack, stroke, kidney disease, or blindness—if their high blood pressure is not detected and treated. And the only way to know if your pressure is too high is to have it checked regularly.

### What is blood pressure?

A normal heart beats about 60 to 80 times a minute, according to the AHA. With every beat, or contraction, it pumps blood into your arteries. This creates pressure.

When the heart rests between contractions, the pressure in your arteries lessens.

“Healthy arteries have a bit of elasticity,”

says Mark Adams, MD, a vascular surgeon on Harrison's medical staff. This allows them to expand and relax in response to the pressure exerted on them.

Your arteries expand depending on how much force is exerted upon them, Dr. Adams says. Heavier force translates to higher blood pressure.

Blood pressure isn't static. It changes throughout the day, going up when you exercise and down when you sleep. It can go up when you become excited. It can even fluctuate with changes in posture.

That's normal. Problems arise, however, when your blood pressure is consistently high, a condition known as hypertension.

### Measuring blood pressure

The first number in a blood pressure measurement (systolic) reflects the pressure when your heart beats.

The second number (diastolic) is the lowest level of pressure measured between heartbeats. Both numbers are measured in millimeters of mercury, or mm Hg.



**Freebie!** Keep track of your blood pressure with a handy wallet-sized card. Call 360-415-6920 for your free one today.

# Big rewards from a little daily exercise

Do you have 10 minutes? If you can spare this short amount of time at least three times a day, you can help lower your blood pressure.

The key is to spend the time being physically active. Of course, you can combine the minutes into a half-hour of exercise, but it's the total time that counts. Exercise can help your blood pressure medication work better. Or, it can keep you from having to start taking medication. Also, if your blood pressure is normal, being active can help keep it that way.

You can begin a simple exercise plan by taking the stairs instead of the elevator or by parking at the far end of the lot. Gradually build up your program—gardening, walking, or wheeling yourself in your wheelchair adds up to good exercise. Swimming, bicycling, or playing team sports gives you even more of a workout.

Exercise makes a positive health difference for people of any age. Be sure to check with your doctor first if you're not used to exercise or if you have any chronic health problems.

National Heart, Lung, and Blood Institute, [www.nhlbi.nih.gov](http://www.nhlbi.nih.gov)



**GO:** To learn how blood pressure affects the whole body, visit [harrisonmedical.org/bloodpressure](http://harrisonmedical.org/bloodpressure).



## Got 2 minutes?

Take a quick break from shopping to find out if you have high blood pressure. At Silverdale's Kitsap Mall, Harrison's new Heart Check Center (near the food court) features automated, self-calibrating blood pressure and pulse-rate monitors.

Untreated high blood pressure can lead to cardiovascular disease, which is why it's so important to monitor blood pressure regularly.

Harrison's convenient screening kiosk also provides test record cards and other health information.

Categories of blood pressure include:

**Normal**—119 or lower and 79 or lower.

**Prehypertension**—120 to 139 or 80 to 89.

Prehypertension may raise your risk for high blood pressure.

**Stage 1 hypertension**—140 to 159 or 90 to 99.

**Stage 2 hypertension**—160 or higher or 100 or higher.

For people with diabetes, hypertension starts at 130/80.

### The dangers

High blood pressure's main danger is that it has no visible symptoms.

The continuous force of high blood pressure against your arteries' walls can harden them. That makes them less able to expand and makes it harder for blood to flow through them, says Dr. Adams.

Hard, narrow arteries can form plaque and blood clots, raising the risk for stroke and heart attack.

Narrowed arteries also force the heart to work harder, which can enlarge it and make it less efficient.

A heart that pumps less efficiently can mean that your organs don't get as much blood and oxygen as they need.

High blood pressure may be linked to:



**Featured expert**  
**Mark Adams, MD**

- Heart failure.
- Kidney failure.
- Eye problems, including blindness.
- Mental decline and Alzheimer's disease.

### The causes

Sometimes high blood pressure is caused by another disease, such as a problem in the endocrine glands. But for the vast majority of people with high blood pressure, its cause is a mystery.

Certain risk factors, however, increase your chances of having high blood pressure. These include:

**Race.** Black people, for example, are at higher risk than are white people.

**Heredity.** You're more likely to have high blood pressure if a close relative has it.

**Age.** Arteries are less flexible with age.

**Weight.** Many people who have high blood pressure are overweight.

**Alcohol.** Regular, heavy use of alcohol raises blood pressure.

**Sodium.** Excess salt intake can raise blood pressure in some people.

**Inactivity.** Lack of exercise is linked to both overweight and high blood pressure.



# Fear of fear itself

Don't shy away from getting help for panic disorder

## Harrison's behavioral health team

Saeed Aflatooni, MD  
William Hiltz, MD  
Sule Karakus, MD  
Sean Killoran, MD  
Robert Reinach, MD  
Vanraj Varu, MD  
Janet Vondran, MD  
Daniel Wanwig, MD

TO DESCRIBE PANIC attacks as bouts of nervousness would be like calling the sinking of the Titanic a boating accident.

Neither description does justice to the scope and magnitude of its subject.

Panic attacks can make people feel as if they are about to die, cause them to flee a public store or refuse to leave their own homes, or force them to quit school or a job.

Even though panic disorder can be disabling and life-altering, it also can be treated and managed.

### What is panic disorder?

Panic disorder is most easily defined by its hallmark characteristic—the panic attack.

A panic attack is a sudden surge of overwhelming fear accompanied by physical symptoms that increase the sensation of impending doom. It often strikes in familiar surroundings, says the American Psychiatric Association (APA), and in the absence of any apparent threat.

Panic disorder usually develops in early adulthood and occurs three times as often in women as in men. The disorder appears to run in families, suggesting a biological basis.

But it often is triggered by a stressful event, such as a death, suggesting an emotional basis.

If you have multiple, unexpected panic attacks, you are considered to have panic disorder.

## Panic symptoms

Signs of a panic attack appear suddenly and without warning. They disappear in a few minutes. Symptoms may include:

- ✓ A pounding heart or racing heartbeat.
- ✓ Sweating, chills, or hot flashes.
- ✓ Fear of losing control.
- ✓ Shortness of breath or chest pain.
- ✓ Numbness or tingling.
- ✓ Nausea or abdominal pain.
- ✓ Feeling unreal or disconnected.

American Psychiatric Association, [psych.org](http://psych.org); National Institute of Mental Health, [nimh.nih.gov](http://nimh.nih.gov)

## The importance of treatment

The two main treatments for panic disorder are medication and cognitive behavioral therapy, says the APA.

Medications that can help prevent panic attacks include anti-anxiety agents and anti-depressants.

Cognitive behavioral therapy can help you identify and avoid panic-related thought processes as well as desensitize you to fear-inducing situations.

Additional sources: American Psychological Association, [apa.org](http://apa.org); American Psychiatric Association, [psych.org](http://psych.org); Anxiety Disorders Association of America, [adaa.org](http://adaa.org).



**GO: Our Behavioral**

**Health Unit has psychiatrists, psychiatric nurses, social workers, and pharmacists who can help you handle panic. Call 360-792-6615.**

# The skin you're in

Guys, give your skin the TLC it deserves

**Y**OU TRAVEL IN it every day, and you don't like mentioning everything that's wrong with it.

No, we're not talking about your car. We're talking about your skin.

It's one of those topics that many men hesitate to bring up. But your doctor or a dermatologist can provide advice on, or treatment for, many of the problems that plague men's skin, including:

**Excess hair.** Laser therapy can remove unwanted and unsightly hair on your back or shoulders, says Daniel Frum, MD, a dermatologist on Harrison's medical staff. The laser damages the follicles so hair falls out and the majority does not grow back.

Laser hair removal also can help treat stubborn shaving problems due to ingrown hairs, which occur when curly hair grows into a nearby follicle.

**Hair loss.** Then there's the problem of losing hair in spots where you do want it.

Fortunately, there are several options for treating male baldness. Whether it's the topical solution minoxidil, the pill finasteride, or hair transplants, a dermatologist can help you find a treatment that helps.

**Fungus fun.** You don't have to just suffer with athlete's foot or jock itch, Dr. Frum says. These fungus-related problems are easily treated with prescription or over-the-counter medicines. Your doctor can recommend the best type.

To prevent recurrence, be sure to keep your skin clean and dry. Use a fresh, dry towel following a bath or shower.

**Aging.** Sunscreen helps prevent damage that prematurely ages skin, and also protects you from skin cancer, Dr. Frum says. Wear a sunscreen with a sun protection factor of 15 or higher when spending time outdoors. There are many new products available, and your dermatologist can help you choose the one that's right for your skin type.

Remember, the first step in addressing any of these issues is to talk frankly with your dermatologist. If you have a question, don't be afraid to ask it.



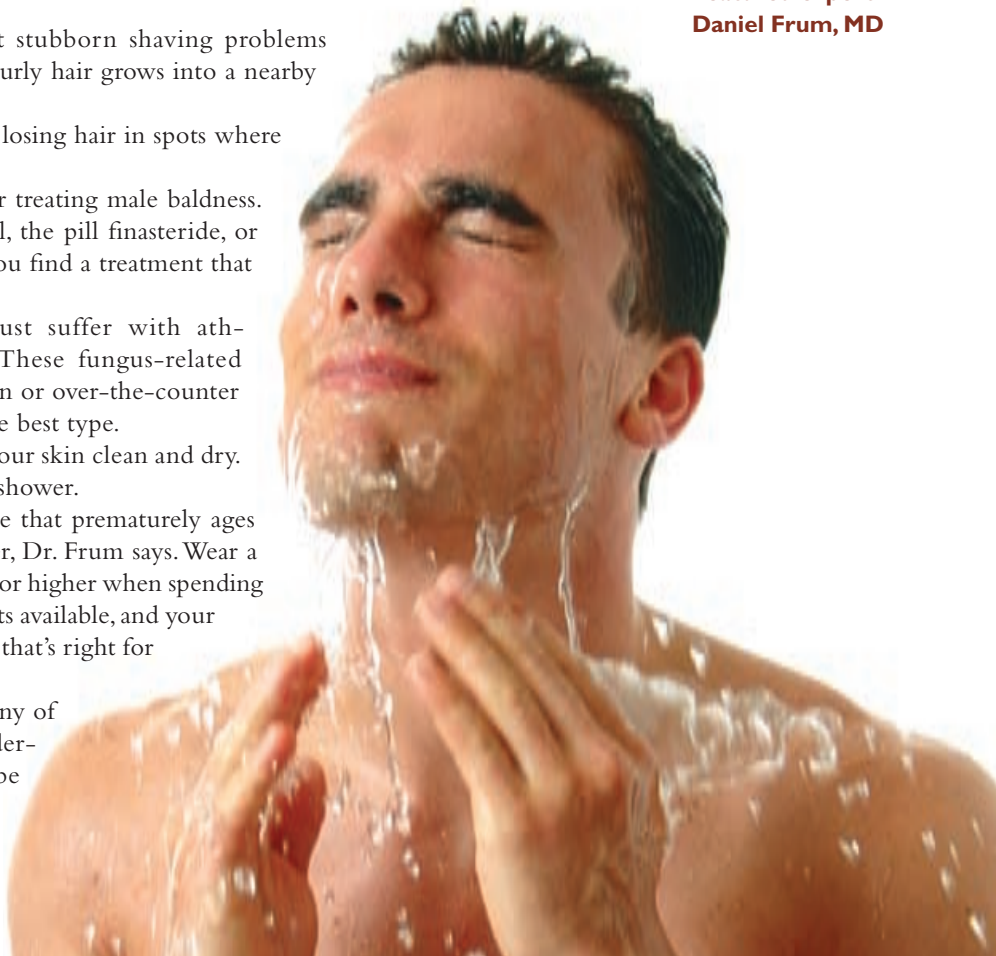
**GO:** If you're itching to learn more about skin conditions and how to prevent or treat them, visit [harrisonmedical.org/skin](http://harrisonmedical.org/skin).

## Harrison's dermatology team

Irene Buno, MD  
Robert Butler, MD  
Edward Carmick, MD  
Christina Hardaway, MD  
Dianne Levisohn, MD  
Michael Metzman, MD  
Eric Rasmussen, MD  
Lynn Sudduth, MD



Featured expert  
Daniel Frum, MD



To find a dermatologist near you, visit [harrisonmedical.org](http://harrisonmedical.org) and click "Find a Doctor." For physician referrals, call 360-692-4881.



## New clinic coming to Belfair

Harrison Medical Center broke ground August 5 on a new Belfair clinic in partnership with the newly formed North Mason Public Hospital District 2.

Harrison will offer 12-hour urgent care seven days a week, as well as primary care services and outpatient laboratory and imaging services. In spring 2009, these healthcare services and more will be available in a new, 12,000-square-foot medical building located at Highway 3 and Romance Hill Road.

Of the North Mason residents who were hospitalized in 2006, 64 percent used Harrison facilities. It's a natural move for Harrison to extend its reach and provide accessible, close-to-home healthcare services to residents of the greater Belfair area and beyond.

Mason County-based resident and developer Rick Krueger, of Romance Hill LLC, will build and own the medical building. Stephen Johnson, Inc., of Belfair, will serve as the project's general contractor.

## Freebies!

» Does Harrison have a submarine? Find out the answer to this question and more at [harrisonmedical.org/answers](http://harrisonmedical.org/answers). Call **360-415-6920** to request a keepsake postcard series that highlights Harrison's specialty care and state-of-the-art technology.

» If you're 50, it's time to think about colorectal cancer. Call **360-415-6920** to request your free EZ Detect™ screening kit that also includes an information card to help you identify signs and risks.



## Port Orchard urgent care open late

**When bees refuse to mind their own beeswax, we're here to take the sting out—16 hours a day.**

**Harrison Medical Center's**

**Port Orchard campus now has expanded urgent care hours—**

**7:30 am to 11:30 pm every day. And in**

**January 2009, the campus will become home to a 24-hour urgent care center, offering expanded imaging services, primary care, and outpatient services in a new, 36,000-square-foot medical building.**



**Jim Smalley**



**Cindy May, RN, BSN, MSN**



**Ron Morris, MD**

## Laudes for leaders

### Congratulations!

Jim Smalley, chairman of Harrison's board of directors, recently received the national 2007 Gold Presidential Volunteer Service Award for his more than 500 hours of community service.

**Welcome!** Cindy May, RN, BSN, MSN, is Harrison's new vice president of operations and chief nursing officer.

**Welcome!** Ron Morris, MD, is Harrison's new vice president of quality and chief medical officer.

# mark your calendar

HARRISON MEDICAL CENTER

Here's a glimpse at Harrison's events, support groups, and classes. Find a complete listing at [harrisonmedical.org](http://harrisonmedical.org). Classes are free unless otherwise noted.



## EVENTS

### Blood Drive

• Friday, Nov. 14,  
11 am to 1 pm and  
1:45 to 5 pm  
Auditorium, Harrison  
Bremerton  
**360-415-6920**

## SUPPORT GROUPS

### Alzheimer's Caregivers

• First Monday of each  
month, 1 to 2:30 pm  
Harrison Annex,  
750 Lebo Blvd.,  
Bremerton  
**360-415-6920** or  
**360-792-9363**

*For those caring for someone with memory loss.*

### AWAKE

• Thursday, Dec. 18,  
7 to 9 pm  
Harrison Annex,  
750 Lebo Blvd.,  
Bremerton  
**360-792-6882**

*Bring your CPAP machine for a free pressure check.*

### Better Breathers

• Meets quarterly; call  
for dates.  
Rose Room, Harrison  
Silverdale  
**360-792-6686**  
*For those with chronic  
respiratory disease.*

### Brain Injury

• Second Thursday  
of each month,  
3 to 4:30 pm  
Garden Room,  
Harrison Silverdale  
• Fourth Wednesday  
of each month,  
4:30 to 6 pm  
Harrison Annex,  
750 Lebo Blvd.,  
Bremerton  
**360-475-6480**

### Breast Cancer

• Third Wednesday of  
each month, 7 pm  
Oncology Confer-  
ence Room, Harrison  
Bremerton  
**360-792-6885**

### Cancer Caregivers

• Last Tuesday of each  
month, 6 to 7:30 pm  
Rose Room, Harrison  
Silverdale  
**360-698-4611**

### Hearing Support

• Meets third Saturday  
of each month,  
1 to 4 pm  
Iris Room, Harrison  
Silverdale  
**360-871-0997**  
*Led by the Hearing Loss  
Association of Kitsap  
County.*

### Look Good... Feel Better

• First Monday of each  
month, 1 to 3 pm  
Oncology Confer-  
ence Room, Harrison  
Bremerton  
**800-227-2345**  
*Helps women overcome  
appearance-related effects  
of cancer and treatment.  
Registration required.*

### Lupus

• First Saturday of each  
month, 1 to 3 pm  
Auditorium, Harrison  
Bremerton  
**360-698-0186** or  
**360-598-1570**

### Ovarian Cancer

• Third Tuesday of each  
month, 1 pm  
Rose Room, Harrison  
Silverdale  
**360-871-0407**

### Parkinson's Disease

• First Tuesday of each  
month, 1:30 pm  
Canterbury Manor,  
703 Callahan Drive,  
Bremerton  
**360-895-6220**

## CLASSES

### Becoming Grandparents

Saturday, Oct. 4, 10 am  
to noon  
Orchid Room, Harrison  
Silverdale

Call **360-792-6765**.

\$30 for two  
*Grandparents-to-be learn  
the latest newborn care  
and how to build special  
relationships.*

### Cardiac Health and You

• Twice monthly  
Call **360-415-6910** for  
dates, times, and fees.  
*Learn to prevent heart  
disease and stroke.*

### Diabetes Self-Management Program

• Twice monthly,  
8:30 am to 3:30 pm  
Call **360-415-6910** for  
information and fees.

### Gestational Diabetes

• Offered weekly  
Call **360-415-6910** for  
dates, times, and fees.  
*For expecting moms with  
gestational diabetes.*

### Infant Massage

• Saturday, Nov. 8,  
10 am to noon  
Iris Room, Harrison  
Silverdale  
Call **360-792-6765**.  
\$20 per family  
*Learn the benefits of  
touch. Led by a certified  
infant massage therapist,  
this course is designed for  
infants not yet crawling.*

### Orthopedic Surgery

#### Total joint surgery

• Tuesdays or Thursdays,  
noon to 2 pm  
3 West, Harrison  
Bremerton  
**360-792-6695**

*For those considering  
hip or knee replacement  
surgery. Registration is  
necessary.*

#### Spine Surgery

• Wednesdays,  
11 am to noon  
3 West, Harrison  
Bremerton  
**360-792-6695**

*For those considering  
spine surgery. Registration  
is necessary.*

### Preparing for Baby

*An array of classes,  
whether you're first-time  
parents or seasoned pros.  
For a listing, call **360-  
792-6765** or visit  
[harrisonmedical.org](http://harrisonmedical.org).*

### Safe Sitter

• Saturdays, Oct. 4  
and 11\*, 9 am to 4 pm  
Iris Room, Harrison  
Silverdale  
**360-792-6765**  
\$50, includes a backpack  
and safety kit  
*\*Two-day class includes  
CPR. Registration is  
necessary.*



HARRISON MEDICAL CENTER  
2520 Cherry Ave.  
Bremerton, WA 98310

Nonprofit Org.  
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Tacoma, WA  
Permit No. 948

## Rocks' winning nomination

"Emily took care of my family and my three-day-old infant when my baby was admitted to the hospital. She had an amazing way of calming my fears yet acknowledging the concerns I was having as very valid. She explained what was happening and what was going to happen for both my baby and my family. She did not just follow the physician's directions, but utilized her own nursing interventions to provide better care for us. She really set the tone for our stay and calmed my fears. Emily was a true professional. As an RN myself, I feel that she is someone that I want to strive to be just like." — Nicole Hlavaty, Bremerton

# Care that rocks

EMILY ROCKS NEVER had a surprise like the one she received as she strolled into Harrison Medical Center's Silverdale campus, expecting to attend a casual party for a co-worker.

Little did she know that the party was for her. Or that a \$500 Nordstrom gift certificate had her name on it.

Rocks, a registered nurse and certified pediatrics nurse, has been part of Silverdale's Pediatrics Unit for the past seven of her 11 years in the nursing profession. As she walked into the unit, a large group of fellow employees and hospital leaders congratulated her for being chosen as Harrison's winning nurse in the Salute to Nurses tribute contest.

Harrison partnered this year with Seattle's KIRO 7 TV to support the contest, which

**Our community recognizes exceptional care: 44 Harrison nurses received 56 contest nominations.**

annually celebrates the vast and valuable contributions western Washington nurses make to healthcare.

Patients, family members, community members, staff, and physicians wrote nominations for



**Emily Rocks, RN, CPN**

nurses who they felt went above and beyond to care for those in need.

Part of Rocks' surprise at her win stemmed from her feeling that all Harrison nurses give extraordinary care.

"There is absolutely nothing that I do that is any different from anyone else I work with," she says.

Harrison has developed an environment where nurses are supported by management and are happy and honored to work with each other, Rocks says. And that's what keeps her excited about the work she does and the care she gives. "I feel that I can do my best every day," she says.