

YOUR INFORMED HEALTH
AND COMMUNITY SOURCE

Summer 2008

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Life **SMH** Journal



SMH has earned recognition as among the top hospitals in the nation for Patient Safety for the second year in a row. "What patients and their families should know is that we're looking ahead, not backward, and trying to get even better."

William Williams, M.D.
SMH Chief Medical Officer



Slidell Memorial Hospital

Your Hospital for Life.™

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SMH

REHABILITATION TEAM

Celebrates Twenty Years of Rebuilding Lives

By: Lori Archer

Imagine going from being a charismatic businessman—a great public speaker—to not being able to put two words together.

Imagine going from being able to power a yacht to not being able to move your own body—let alone walk.

This was the case for a former Slidell Memorial Hospital rehab patient who suffered a massive stroke in his 50s. He came to rehab after stabilization, barely alert with a fixed gaze, unable to speak, swallow or move independently. After approximately 35 days on the unit, he was able to eat and drink regular foods, dress and groom himself, and walk with a cane. Although he still had some trouble finding the right words, his speech also improved dramatically. He subsequently improved to the point that he was able to drive again.

So to what does he attribute his success? To hard work and to the dedicated team at Slidell Memorial. Recovering from a stroke isn't for sissies. Neither is fighting to get your life back after a car accident or a debilitating disease. The good news is that when you or someone you love needs rehabilitation care, you have to go no further than Slidell Memorial Hospital's In-patient Rehabilitation Unit, winner of Uniform Data Systems' 2008 Top Performer Award in recognition for outstanding rehabilitation program performance. This is the second year in a row the unit has received this prestigious honor.

Founded in September of 1988, the unit has served thousands of patients recovering from stroke, fracture, brain injury, arthritis, amputation and other challenging conditions. SMH has the only rehabilitation unit in St. Tammany Parish to hold accreditation from the Commission on Accreditation of Rehabilitation Facilities (CARF). More

than 200 patients go through the program each year. While the unit has received many national awards and accreditations (see box), their patients' outcomes are what matter most to the dedicated team at SMH. An impressive 87% of the unit's patients return home after rehab rather than go to a nursing home—significantly higher than the national average of 71.8%. Plus, the average percentage of improvement in functional skills for SMH rehab patients is 53.6%, while on the national average patients improve 45.9%.

SMH not only has positive outcomes, they get positive feedback from their patients. The Rehab Unit's patient satisfaction scores are through the roof with 98% of patients saying they are satisfied with the care they received. What's more, 95% of those responding said they would recommend the unit to others. And 85.1% of the questions were responded to with "Very Good"—the highest possible answer.*

To what does the unit owe its success? Great leadership provided by the Medical Director Dr. G. Reddy and the team approach each staff member is dedicated to. For the last 17 years, the medical director for the 15-bed inpatient unit has been physiatrist Gollamudi H. Reddy, M.D., a Board Certified specialist in physical medicine and rehabilitation.

While these are impressive credentials, we like to think of Dr. Reddy as a good, old-fashioned country doctor. He uses state-of-the-art equipment, treatments and medicines—he gives patients what they need—but, most of all, Dr. Reddy believes in the value of good old-fashioned hard work with the therapists.

Lynne Lee, a speech-language pathologist, has worked on the unit 19 years—longer than anyone else. Bruce

Clement, FACHE, Chief Ancillary Officer, who initiated the Inpatient and Outpatient Rehabilitation services at SMH stated “there is no better recommendation I can give in that my own family has utilized services, inpatient and outpatient and the care and compassion they received was exceptional.”

“Dr. Reddy treats everyone’s opinion as valuable,” added Lee. “We all have an equal contribution to the team.”

Reddy’s staff includes specialized rehabilitation nurses, physical therapists who help patients gain mobility, occupational therapists who work to help patients regain independence in daily living activities, speech-language pathologists who work to restore communication and swallowing skills, recreational therapists who evaluate and provide recreation and leisure opportunities, and a case manager/social worker who helps patients deal with emotional, social and financial issues. Other services include audiology, dietary, orthotic/prosthetic, podiatry, seating specialists, and vocational rehabilitation. The team puts their best foot forward so their patients can do the same.

Altogether, the unit is made up of almost 40 experienced professionals including specialists such as Rosita Henley, an occupational therapist with special neurodevelopmental training, a technique used for patients with brain injuries. Instead of using machinery, Henley uses hands-on treatment to help the brain reconnect with the body.

The unit also offers unique programs such as a Therapeutic Garden, which allows patients to work on regaining their strength while doing something they enjoy—getting their hands in the dirt. Patients also benefit from a popular Pet Therapy Program which promotes emotional well-being. Chance, a black lab registered by Therapy Dogs International, comes twice a month to visit with the patients. As a hospital volunteer, Chance wears his volunteer badge proudly.

According to Lee, “When Chance visits, you can see the patients brighten up and some will become more conversant. They are given the opportunity to pet the dog, and to give him treats.

“Sometimes, the therapist and the dog will work together to get the patient to perform a task, such as tug-of-war to increase arm strength.”

The entire rehabilitation team gets together during weekly meetings to review patient charts and discuss treatment plans, progress and goals.

With input from the patient and the family, plans are

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updated and revised. The team doesn’t have a “one-treatment- plan-fits-all” philosophy. Rehab patients are recognized as individuals with their own unique needs.

A typical day on the unit involves lots of work—about three hours each day with various therapists. Pajamas and hospital gowns are traded in for comfortable street clothes, and patients are encouraged to eat in the dining room, not in bed.

As you can imagine, many rehab patients have a lot to deal with, and some need motivating. Once a patient has experienced a stroke or lost a limb, for example, they typically go through a mourning process. And the younger a patient is, the more severe the mourning.

“In the last two years, I’ve noticed that our stroke patients are younger than they were previously,” Lee pointed out.

Still, with understanding, encouragement and a lot of hard work, they learn to focus on what they can do, not what they can’t. As a patient progresses, he is encouraged to take what is called a “therapeutic pass.” This might be a visit home or an outing to a favorite park or restaurant. More than just “getting out,” the pass is kind of a “trial run,” helping to identify any future therapy needs, or any family education or changes that need to take place in the home before the patient is released.

When appropriate, before a patient is discharged, home evaluations are conducted by staff. The SMH team doesn’t just come in and tell you to call a carpenter to accommodate a wheelchair. Instead, they do all they can to problem-solve, to work with what is already there to make functioning at home possible.

OUTPATIENT REHABILITATION

Due to limitations put on patients by Medicare and insurance companies, the length of time a patient is able to stay in in-patient rehabilitation has gotten shorter and shorter over the years. What hasn’t changed is how long it takes people to heal. Often Slidell Memorial’s 12,000-square-foot Outpatient Rehab Unit, located in the Wellness Pavilion at 501 Robert Boulevard, picks up where the inpatient unit leaves off.

“Twenty years ago, what we’re doing might have been handled in an inpatient unit,” said Julia Thomas, a physical therapist with more than 20 years’ experience. “Today, we see patients who come from rehab centers, hospitals or from the doctor’s office.”

At first glance, the facility doesn’t look all that much different than a state-of-the-art health club. The difference is



the people who work out here are doing more than getting ready for swimsuit season—they're performing exercises that will help them get their lives back. Every rep, every set, is one step closer to independence.

Thomas believes that, when possible, outpatient therapy is preferable to in-home visits. "When patients go home from the hospital, there's a risk that they'll start cocooning," she explained. "When patients go to outpatient rehabilitation three times a week, they have to shower, get dressed, get in the car...that's all therapy in itself."

SMH's state-of-the-art out-patient facility is one of the best in the region, offering an aquatic therapy pool, electrical stimulation, fluidotherapy, ultrasound, cervical and lumbar traction, Cybex, Lifecycle, plyometric and Core exercises—even phototherapy. Phototherapy is a combination of UVA and UVB light at specific doses that provides excellent results for patients with psoriasis and eczema.

Thomas said that you can look in the phone book and see dozens of therapy centers, but she likes to think what they do at SMH is unique. "We're really the only place that is full service," she said, "We can handle a wide variety of diagnoses from back pain to bilateral amputation. Plus, our staff is amazing."

Like patients in the inpatient rehab unit, outpatients work one-on-one with physical therapists, occupational therapists, and speech-language pathologists. Plus, SMH's outpatient rehab unit is the only outpatient facility in the area to offer aquatic therapy from a therapist with Red Cross safety training. Aquatic therapy is an excellent treatment for people who may not be able to exercise effectively on land. The elimination of gravity makes movement easier and the warmth of the water makes exercise more comfortable.

The life of a therapist can be very rewarding. Imagine how it feels to help a 16-year-old athlete with chronic shoulder pain and ankle sprains get strong enough to play both high school and then college baseball. Or to help a 45-year-old restaurant owner, often described as a "one-woman show," get back to work after a wrist fracture left her unable to straighten her fingers fully or make a fist. Thomas says her work with patients is rewarding. "I once

heard a therapist say he judges how well he's doing in cookies—by the number of cookies patients bake for him. I know what he means. When people take the time to do that, it makes you feel really special. It isn't the cookie itself—it's the thought that went into it."

SMH offers the only Stroke Support Group on the Northshore, which is free and open to anyone in the community, including stroke patients, family members and caregivers. The group, led by Sarah Lyon, LCSW, meets the second Wednesday of every month at 5:30 p.m. in Inpatient Rehab Unit, located on the first floor of the hospital. For more information, call 985-643-2200.

AWARDS/ACCREDITATIONS

- ★ Three-year CARF Accreditation for Comprehensive Inpatient Rehabilitation Program (Superior Quality)
- ★ Three-year CARF Stroke Specialty Accreditation (Superior Quality)
- ★ 2007 & 2008 Outstanding Performance Award (Uniform Data System's top decile or 90th percentile for patient outcomes for the 800+ hospitals evaluated)

*Patient Satisfaction Scores are from surveys conducted by Press-Ganey Associates.

Just Outside the Door

By: Melissa Lee and Joe Sanford

Just like thousands of children have for over a hundred years, the little boy and his parents walked into a family camp in Slidell for a weekend visit. After setting down his bags, his host, Louisiana's Senior United States Senator Mary Landrieu walked with him to the back door of the camp. The youngster stood in awe of what he saw.

"What world is this?" he asked, as he saw Lake Pontchartrain as generations of families have, up close, personal and strikingly beautiful.

The camp near the end of Carr drive has been the heart and soul of the Landrieu family for more than 40 years. The modest 1,000-square-foot camp purchased by her grandmother in 1962 has proved to be the greatest investment imaginable for the family.

"The Taj Mahal wouldn't have been more wonderful for our family, the camp just meant so much to all of us," said Landrieu.

And so it's been for many families seeking an escape from the city heat, families who found solace in the piney woods, healing springs and clean air of the Northshore.

St. Tammany has not always been the commercial and residential hub it is today. Not by a long shot. The St. Tammany we know today began as a healthful escape, a leafy respite from urban concerns.

In 1834, Mandeville was developed as a resort for wealthy residents of New Orleans. The city

dwellers believed that the numerous trees in the area emitted Ozone, creating a kind of healing air that could soothe their jangled nerves. The resorts were an immediate success, spurring the development of another health-based community, Abita Springs, where underground spring waters furnished supposedly healthful baths for public use.

It wasn't just the destination that called them, but the journey as well.

A one-dollar steamboat ride across Lake Pontchartrain was an occasion for

same groups would stay for sessions at the Dew Drop, giving the Northshore a preview of the musical art form that would conquer the world and define New Orleans culture for generations - jazz.

Many visitors to the Northshore stayed for the summer, avoiding the Malaria epidemics that were common at the time. Once in Mandeville, a quick train trip into Covington, a long-established community already, might ensue, with stops at local hotels, restaurants and spas.



celebration, with jazz bands drafted from the clubs around Storyville providing the entertainment. Those

By the 1880's, Slidell came into existence as the station for the New Orleans and Northeastern Railroad, a

new line that connected New Orleans with Meridian, Miss., providing the city folks another option for travel to the Northshore.

Almost immediately, wealthy travelers built guest homes and camps along the shores of Lake Pontchartrain. And, like the Landrieu family, languished in the cool lake breeze, abundant seafood and restful scenery.

And like the many generations before them, sharing the Landrieu camp with family was the highlight of hot, sticky summer days for the children. "One neighbor used to tell us that when the sun came up, it looked like someone had kicked an ant pile. All of us were up and out and enjoying the lake," said Mary Landrieu laughingly as she recalled days when swim suits were their uniform de jour, morning until night, all summer long.

As the oldest of Moon and Verna Landrieu's nine children, Mary has vivid memories, lessons learned at the family camp. She remembers special times with her grandfather who taught the youngsters the fine art of fishing, and of the skill of patience. He spent many hours untangling fishing lines attached to cane poles held by small hands. The camp was where the Landrieu's learned other water sports as well, including boating and skiing. But most importantly, the camp engendered an appreciation for the lake and the fantastic ecosystem that is the Northshore.

"We'd take the old Chef Bridge, and every time the car would cross the railroad tracks, our grandmother would say, 'roll down the windows children and smell that fresh lake air.' Even now, when I cross the lake I roll down the car windows and smell the lake air. I know we are home," she said.

Over the years, additions helped the size of the camp grow to accommodate the expanding size of the Landrieu family.

They were at the Carr Drive camp in late August 2005, enjoying time with family and watching the forecast track of Hurricane Katrina. The news reports weren't good, and, like everyone around them, the family was forced to leave.



It was a bittersweet moment. "As we were driving away, I told the children to take a last look at the camp. We just knew we wouldn't see it again." Despite the hope that it would be spared, the ravages of the storm washed the camp away.

Finally, when she was able to return to the site, there was no sign of the camp that held so much history and happy memories for her family. The structure was gone, but the love of place and sense of family history prevailed.

Like so many other families in our area who lost homes during the storm, the destruction was a difficult reality to face. And also like so many others, they now look to the future.

"All nine Landrieu children are now rebuilding the camp together and we hope that our 37 children will

"One neighbor used to tell us that when the sun came up, it looked like someone had kicked an ant pile. All of us were up and out and enjoying the lake..."

Mary Landrieu
U.S. Senator

enjoy it as much as we did," said Lt. Governor Mitch Landrieu.

In a sense, everything changed with Katrina. The young visitor who marveled at the magical world outside the camp door surely has a very different view of this world now.

Our lake has been with us always, ever changing, yet ever the same, providing two hundred years of memories for families all over the region, a spiritually charged amalgam of prehistoric

karma and natural grace. And despite the change, destruction and disruption, the things that are most important remain constant here for all of us—the love of family, the comfort of friends and the exquisite beauty just outside the door.

What Patient Safety Means

A Conversation with the Chief Medical Officer

By: Chris Smith

This spring, Slidell Memorial Hospital was recognized as a 2008 Distinguished Hospital for Patient Safety by HealthGrades, the leading independent U.S. health care ratings company. The award placed SMH among the top five percent of hospitals in the country for patient safety outcomes.

Dr. William Williams joined Slidell Memorial Hospital in December 2007 as chief medical officer. His distinguished career in the United States and around the world includes experience as a chief medical officer and medical director, and as a physician specializing in infectious disease, tropical medicine and hospital epidemiology. SMH Life Journal recently talked with Dr. Williams about his philosophy and about what the Distinguished Patient Safety Award means to the hospital.

Life Journal: What led you to a career in health care and to your leadership role at Slidell Memorial Hospital?

Williams: As a child I had a keen interest in science. I also felt from an early age that I wanted to find work that allowed me to help people. That may sound naïve, but it really was how I grew up. In fact I had no idea how far—literally—those ideas would take me. Over time, I had the opportunity to live and work in Asia, Haiti, Panama, Canada and in several roles in academic medicine, managed care, corporate medicine and various medical facilities in the United States. I'm reminded every week how those diverse experiences were instrumental in preparing me for the eventual role of chief medical officer at Slidell Memorial at a unique time in our history.

Life Journal: It's interesting to look at the factors that were used to measure patient safety performance among your hospital peers in the country. But what do you think the award means to the lives of individual patients and their families in the community?

Williams: It's reassuring news for families who entrust us with their health. But we won't ever be satisfied that things are perfect. We have to keep working at it every day.

I've learned in person that people around the world, including all of us who live in advanced countries—Americans, Canadians, Europeans, Australians and others—realize that hospitals can be dangerous places, ironically. In our country, we have the most expensive health care system in the world, but it's not safer in general than the German, British and other systems.

That's not just because of the challenges of being safety-conscious at every point in the process. It's also because of some things beyond our control, such as the overuse of antibiotics in our food chain and by some physicians. Unfortunately, that has resulted in a dramatic growth in treatment-resistant infections that can be a threat to patients.

Think about it: When a patient arrives at a hospital, they may already have a dangerous bacterial organism on their skin and not know it. Without proper care, that bacterium could get into an incision during surgery. It's well known that the effective antibiotic drugs have not been keeping up with the "bugs". The safety award is a fine measure of how we've done in the past. What patients

and their families should know is that we're looking ahead, not backward, and trying to get even better—including microbial safety.

Life Journal: How have you and employees at Slidell Memorial responded to the patient safety award? What, if anything, will you do to build on the achievement?

Williams: Everyone should be justifiably proud of this independent, national recognition that they are working hard on behalf of our patients. But one of the most dangerous things in life is a compliment. Some people could be tempted to just sit back and just enjoy the glow from awards.

Anyone can see, if they just walk around Slidell Memorial at any time of day or night, that there's no time for that. We just refuse to relax or become complacent.

Life Journal: What's your personal philosophy of leadership; what role do you want to play in helping SMH improve in ways the community will notice?

Williams: One key role for a chief medical officer is to be a liaison between a hospital's administration and medical staff, to see that each understands the other's needs and views. As chief medical officer, I feel compelled to make sure that the processes of patient care are well designed, so we don't take circuitous paths in caring for people.

One specific goal of mine is to make sure that every person who works at Slidell Memorial knows how important their job is, every day, to the quality of patient care we provide. We have to ensure that each person from housekeeping, which we have trained into the Disinfection Team, all the way through the medical staff has the training and resources he or she needs to be the best they can be.

You learn pretty quickly in this field that hospitals traditionally build rigid, hierarchical organizational structures, but we don't think that's ideal. A team approach to medicine is crucial, and we believe that is emerging at Slidell Memorial. To make that more than just nice-sounding goals we have to re-train and engage employees at all levels. Probably that's as important as anything I can do here.

As CMO, I also report how we're doing to our board of commissioners. At some other places that might be a boring process, but Slidell Memorial is fortunate to have a proactive, involved board that is eager to know how we are doing, what we can do better. What I am doing is urging them to look with me at the whole spectrum of care—since every part of our hospital contributes to success or failure. It's a somewhat new idea in the hospital industry that governing boards should concentrate on safety and quality as a priorities. But it's a perfect concept for us.

Life Journal: When I talk with SMH managers and their team members, they are knowledgeable about the latest technology and advanced programs in their area, of course, but what they really want to talk about most is their patients. They seem to believe that every person in the organization, regardless of position, should have input into how things get done. Do those things come naturally here, or must they be developed?



Pictured: Cyrilla Bonds, SMH Safety Officer, Mary Beth Cooper, Director of Quality Assurance and Performance Improvement and Dr. William Williams, SMH Chief Medical Officer.



Williams: On one hand, these beliefs seem to come more naturally in a community hospital than in a huge medical center, but they're certainly not a guarantee. Wherever it springs from, a hospital has to nurture that patient-centered philosophy. This region is fortunate that Slidell Memorial has been able to excel at that in its history.

A team approach within the hospital is exactly what you want to see, because it leads to good outcomes for patients, especially in terms of patient safety.

Life Journal: What do you see as the biggest challenges on the horizon for Slidell Memorial and for the health care industry?

Williams: In terms of how hospitals function, one big challenge is changing the traditional culture and moving toward a team effort. If errors are made, they have to be looked at scientifically, not just for the specific case, but to examine the process to make sure it's not broken. Often the process is broken. That idea is catching on in hospitals. Part of the challenge will be to continue to educate employees, remove any impediments to safety, but keep the idea that every one has a personal responsibility to be on guard.

Another major challenge in this century will be the role that computerized systems will play in helping us cope with the millions of baby-boomers who are aging and beginning to become chronically ill. This sits upon the challenge that there will be fewer physicians, nurses and other technical personnel to help in this endeavor. The other challenge will be how to offer effective medicine efficiently to assure the health system will function for all Americans. This will involve new national commitments as well as a new sense of personal responsibility for each individual to develop good health habits and avoid risk behavior in order to stay healthy.

To meet the challenge, hospitals must develop treatment protocols, large out-patient treatment units and protocols to evaluate patients in an outpatient setting rather than admitting them to a more expensive and possibly unnecessary inpatient stay. Very robust home health follow-ups will replace many of the days presently spent as inpatients. Technology will afford more accurate and rapid results as well as more care delivered by multiple types of care givers using technologic advances with less care by the individual family doctor in his or her single office.

Some people might be surprised to hear that one of the biggest challenges is championing the critical importance of clean hands. It sounds so mundane, but it's one of the major causes of transmission of illness outside and inside hospitals. We're working to improve through new things such as the best point-of-service hand-washing stations at the bedside. We'll also work to empower patients and their families to speak up and insist that all personnel wash or sanitize their hands in front of their eyes. That may not come naturally to people but I want them to feel they are

part of the effort and can feel comfortable taking that kind of responsibility.

Another key challenge obviously is attracting and keeping the best health care professionals. Since nurses spend more than 90 percent of their time with patients, recruiting good nurses is a real challenge everywhere in the country, and we're not immune from that.

At the same time hospitals are facing the ongoing trend toward fewer nurses, the patient population is getting older. It's great that we're living longer, but that means hospitals including Slidell Memorial will see more patients with chronic and secondary illnesses that require a more sophisticated approach to treatment. Some may be prone to falls and other accidents that require hospitalization. How will we meet those challenges? In addition to the culture changes I've talked about, over time hospitals will need to rely more on technology as nursing shortages continue to develop.

The continuum of care, not just the hospital stay, will play an increasingly important role. If you ask most futurists, they will predict not as many in-patient beds at hospitals. The typical hospital stay may become more emergency-room or immediate-care-based, lasting only a few hours. After that, all but the most critical future patients may be transferred to their homes for continued care from home health care professionals.

As the country experiences more constraints on money, hospital staff and other resources, success will come to those who plan ahead. At Slidell Memorial we believe now is the time to get moving toward the future.

SLIDELL MEMORIAL: A SAFETY LEADER IN LOUISIANA

Slidell Memorial is one of only five Louisiana hospitals, and only 165 in the United States, to receive the Distinguished Hospital for Patient Safety Award for two straight years.

The HealthGrades study analyzes nearly 5,000 hospitals and identifies those with the lowest rates of patient safety events, such as post-surgery infections and preventable deaths. Patients at Slidell Memorial and other hospitals that make the grade, according to the HealthGrades study, "are more likely to have successful treatment without experiencing a patient safety event or medical error, on average, at hospitals in this category."

Consumers, along with many of the nation's largest employers, health plans and hospitals rely on HealthGrades' independent ratings and patient safety information to make health care decisions based on the quality of care.

The study uses data from more than 70 independent sources, including the U.S. Department of Health and Human Services Centers for Medicare and Medicaid Services, the Centers for Disease Control and Prevention, the U.S. Food and Drug Administration, state medical boards and state departments of health or public health.

According to HealthGrades, if all hospitals in the country performed at the level of hospitals receiving the Distinguished Hospital for Patient Safety, at least 37,000 deaths could have been avoided nationwide.

Move It and Lose It!

Slidell Memorial Fights Childhood Obesity
With Its Innovative Fit As A Firefighter Summer Camp



By:
Lori
Archer

Growing up is hard. Growing up different—overweight, for example—can be nothing short of painful. With its week-long Fit as a Firefighter Summer Camp, Slidell Memorial Hospital and the St. Tammany Fire District 1 are doing what they can to get overweight children in our community not just moving, but moving in the right direction.

According to the Louisiana Council on Obesity Prevention and Management, 17 percent of children in our state are obese or overweight. Obesity can lead to a number of serious health problems as our children grow to adulthood. The future can hold diabetes, heart disease, osteoarthritis, respiratory problems, sleep apnea—even cancer.

Of course, obesity can take an emotional toll as well. Boys and girls with weight problems typically lack self-confidence, and have trouble being accepted by their peers. They are often the brunt of cruel jokes at school. As a result, it is common for kids with weight problems to suffer from depression and anxiety. They grow up feeling unattractive, ignored, and hopeless.

According to Michelle Partridge, RNC, Director of Women and Children's Services at Slidell Memorial Hospital, being overweight can also

performance at school. "Some kids may become disruptive, while others become introverted—afraid to take risks," she explained.

This summer, 80 youths between the ages of 7 and 12 will take part in the Fit as a Firefighter camp, which was co-founded by Partridge and Fire District Chief Larry Hess. The camp, which runs July 7 to 11 at the Louisiana National Guard and District 1 Fire Training Academy located at Camp Villere in Slidell, filled within days of opening up registration, showing that parents are hungry to find ways to help their children learn life skills to develop healthy habits. Additional participants in the program include Slidell Police SWAT and K9 teams, the Louisiana State Troopers, Cross Gates Athletic Club, LSU Ag Center, Acadian Ambulance, Cancer Association of Greater New Orleans, Slidell Kicks TaeKwondo Center, SMH Parenting Center, Louisiana Wildlife and Fisheries, U.S. Coast Guard, Tammany Twirlers, Pearl River Line Dancers, Smoothie King, and the Louisiana National Guard. The program also received support from Rotary Club of Slidell-Northshore, SMH Women's Health Alliance, Ferrara

Fire Equipment Company, Volunteers of America and Junior Auxiliary of Slidell. Camp Director Taffy Morrison, a parent educator with Slidell Memorial Hospital's Parenting Center, is grateful to the organizations helping to make the camp possible.

"I can't think of another community in the country who has come together to offer a program like this," Morrison said. "It is truly innovative."

Fit as a Firefighter aims to teach children how they can build up their self-esteem through proper diet, exercise and a can-do attitude. Unlike what used to be called "fat camps," Fit as a Firefighter focuses on more than numbers on a scale. The camp gives kids and their families the tools they need to live happier, healthier, safer lives. Also, unlike other weight loss camps, which can cost thousands of dollars, Fit as a Firefighter is free to the first 80 children who qualify.

"We didn't want to have to turn anyone down because of money," Morrison explained. "If a child fits the physical criteria and there's space available, that space is theirs."

Partridge and Hess came up with the concept for Fit as a Firefighter while exercising one day at the gym. Hess mentioned that he had seen a program on the Discovery Health Channel about a weight loss camp for overweight kids and it got him thinking about the childhood obesity problems he sees right here in our own community, and what his department could do about it.

"Fire departments of today are all-hazard agencies—we do more than put out fires. If there's a flood, a car crash, an EMS call, a technical rescue, we're there. It just made sense to me for us to take on this epidemic of

childhood obesity. I'd rather help a kid learn to take care of his heart now than respond to a heart attack later on."

The wheels in his co-founder's brain started turning. Partridge told Hess, "Give me a shot at this. I think we can make this happen."

Partridge brought the idea to her team at Slidell Memorial, and then began the potentially difficult task of encouraging other community sponsors to come on board. As it turned out, the community was very supportive. Morrison said, the idea caught on "like wildfire," and now, in its second year, the camp has received support from dozens of agencies and organizations.

To Chief Hess, changing the life of a child is its own reward. "To see a kid who can't do one sit-up on Monday be so proud to be able to do that sit up for his daddy on Friday is

emotionally

overwhelming. In the 42 years that I've been serving the community, that first

we have them simulate what we do as firefighters. They drag a hose, we have water bucket relays, and then there's 'Save the Baby,' where they negotiate their way through a maze with a doll."

The program also includes daily nutrition classes by a certified dietician and workouts with top-notch fitness trainers from Slidell's Cross Gates Athletic Club. Plus, the week is filled with visits from guest speakers from the community who educate, motivate and entertain.

Campers learn personal safety, including CPR and First Aid training, boating and community safety. They benefit from fun activities such as

karate, water games, and line and square dancing. The

kids also participate

in a cooking class where they

learn to make healthy

snacks. And

a social worker is on hand

to lead discussions and talk to

the children one-on-one

on the emotional aspects of being

overweight.

"We talk about how

campers to be able to compete as equals, and to be able to relate to one another in a non-judgmental way. For many kids, this will be the first time in their lives they'll win a race or won't feel self-conscious among their peers."

Partridge added, "Our campers leave with a real sense of belonging. They make a lot of friends, learn skills that will lead to a healthier lifestyle, and have more self-confidence."

In addition, this year's group of campers will learn about the dangers of smoking and tobacco use. According to everydayhealth.com, 90% of adult smokers started smoking before the age of eighteen, and, of smokers under 18, more than six million will die prematurely from a smoking-related disease. Compared to other states, Louisiana is on the high end when it comes to the number of teens who smoke. Fit as a Firefighter hopes to enlighten kids before they light up for the first time.

But kids aren't the only ones the camp educates. The United States Department of Health & Human Services stated that 80% of overweight children have at least one overweight parent—and it's not just genetics. Researchers at Arizona State University found that when children grow up in families with poor eating habits and lifestyles dominated by television watching and video-game playing, they are 33.3% more likely to become overweight or obese. In addition, many parents of obese children are in denial—refusing to see a problem. That's why Fit as a Firefighter seeks to educate the parents as well as the child not only at camp but through special nutritional sessions just for parents.

"We aren't here to put the parents on a guilt trip, but, like our dietician says, the kids aren't the ones doing the grocery shopping. They're not the ones going through the drive-thru. Children need educated and supportive family members to help them lose the weight and keep it off. We give families what they need to succeed together," Morrison said.

Can one week change a life? Perhaps not, but it's a healthy start.



"To see a kid who can't do one sit-up on Monday be so proud to be able to do that sit up for his daddy on Friday is emotionally overwhelming!"

week at camp was one of the most satisfying I've experienced in my entire career."

Unlike most summer camps, Fit as a Firefighter offers more than basket weaving and archery. And the counselors aren't a bunch of teenagers—they're firefighters, real life heroes in the community.

"People have this image of young, hunky firefighters, and kids want to emulate us," Hess explained. "We're not professional athletes, but we're certainly occupational athletes. In order to get the kids up and moving,

to deal with a bully—things like that," Hess said.

Partridge explained that Fit as a Firefighter is "more than a babysitting service" and that, by the end of the week, "you can actually see definite signs of growth. On the first day, the kids bring things like potato chips and candy bars in their lunch bag. By Friday, they're asking their moms to pack fresh fruit and carrot sticks."

The camp only accepts those children with a real need. "We want the kids to feel comfortable at camp," Morrison explained. "We want our

Ask Your Doctor If It's Worth Your Time.

Lightning-fast CT Scanner Makes the Dream of Fast, Non-invasive Diagnosis a Reality



2004, SMH became the first facility in Eastern St. Tammany Parish to offer multi-slice CT scanning, which provides highly detailed images of the circulatory system and internal organs.

The 16-slice scanner and its new 64-slice counterpart give SMH doctors and patients the advantages of reduced waiting, testing and recovery times. The scanners give families and physicians in the area access

to potentially life-saving technologies including CT angiography, CT fluoroscopy and calcium scoring, all non-invasive procedures that can detect problems early, when they are most treatable.

Computerized Axial Tomography, which people often refer to as a “CAT scan,” combines

rotating X-rays taken from different angles to generate a three-dimensional image. It's a big advantage for doctors evaluating a patient's condition.

Using a coronary CT angiogram, cardiologists get information about the location and extent of plaque build-up in the arteries of the heart. Instead of having to use the more invasive cardiac catheterization procedure, they can get the detailed images they need with nothing more invasive than an IV injection in the patient's arm. After the scan, patients usually can go home to be with their families instead of having to be admitted to the hospital for one or more days.

64-SLICE: MUCH MORE THAN JUST 4 X 16

The new, 64-slice CT technology can do everything the 16-slice scanner does, potentially doubling overnight the number of SMH patients who can be diagnosed each day. But the 64-slice scanner can do something special, too: It's fast enough to create a clear, stop-action image of a beating heart.

Noel Peyton, director of Inpatient Medical Imaging at SMH, said the speed and accuracy of the scanner has improved healthcare quality because it is now possible to find and manage serious heart conditions before it's too late.

“We already had the ability to image any vessel in the body, but the major benefit of the 64-slice scanner is in cardiac screening. It operates so fast that it can take an image while the heart is beating,” she said. As a result, in the future it could replace a percentage of coronary angiograms, which are more invasive.

In the past, CT systems weren't fast enough to capture images of the heart and blood vessels because of heart motion. The new scanner uses specialized software to calculate when the heart is briefly at rest during its rhythmic movement—that's the instant at which the scanner triggers its multiple-layer scan, showing the cardiac anatomy in perfect focus.

“Physicians are keenly interested in this accurate view of coronary heart arteries, where they can see plaque or medical conditions that can lead to serious heart problems. They still have the ability to use Slidell Memorial's excellent cardiac catheterization lab when needed. But now they also have the option of the new scanner without the need for an extended stay by the patient,” Peyton said. “And the risk is lower because with the 64-slice scanner there's no placement of a catheter into the leg in order to inject contrast.”

By:
Chris
Smith

Everyone, it seems, knows a story about a friend or relative who was walking around one minute, the picture of good health, only to be struck down the next by a “hidden” heart or other health condition. Now, thanks to imaging specialists and an innovative CT scanner available at Slidell Memorial Hospital, potential life-threatening cardiac problems cannot hide any longer.

In 2007, Slidell Memorial installed a 64-slice CT scanner, building on the diagnostic capabilities provided by its existing 16-slice scanner. When it began using that CT scanner in

- 0.01

- 0.02

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- 0.12

- 0.13

- 0.14

- 0.15

The cutting-edge CT technology provides accurate measurements of the width of arteries and may help the doctor spot potential blockages. This could be particularly valuable for a group of relatively young people in the population who have no cardiac symptoms but are suddenly surprised by a scary event such as unexplained chest pain.

“Especially for people who have inherited heart disease risk factors but don’t have sufficient symptoms to warrant the time and complex procedure of cardiac catheterization, the 64-slice scanner can help doctors evaluate heart health and either ease patients’ minds or get them the treatment they need,” Peyton said.

As a result, CT scans are an increasingly valuable tool for exploring the cause of chest pain, following up on worrisome stress test results or congenital heart conditions, evaluating arteries before a surgery, or monitoring patients who previously had cardiac procedures.

WHAT HAPPENS DURING A CARDIAC CT SCAN?

The entire 64-slice CT scanning process usually lasts no more than half an hour, most of it taken up by

TIPS FOR A HEALTHY HEART

According to the American Heart Association, people can take proactive steps to improve their cardiovascular health, whether they have a hereditary risk of heart disease or not, by:

- Avoiding tobacco use, the No. 1 preventable cause of heart disease, stroke and lung cancer.
- Getting physically active to build endurance, control blood pressure, reduce cholesterol and weight and reduce your risk of diabetes.
- Eating foods low in saturated fat, trans fat, cholesterol and salt.
- Watching your weight.
- Avoiding excessive alcohol.
- Getting regular health checkups.

small amount of contrast dye and saline, which help the scanner “see” clearly the smaller heart vessels. The actual scan itself only takes about 15 seconds, less than the amount of time



completion of an EKG, the collection of vital signs and introduction of an IV.

The lower a person’s heart rate—60 beats per minute or lower—the better the final image quality, so patients are given an oral medication to take the morning of the test. Any further medications needed to reduce a patient’s heart rate are given at the time of the test through the IV at the direction of the radiologist or cardiologist handling the case.

Just before the scan begins, the patient receives an injection of a

it takes the typical reader to finish this paragraph.

Patients with pacemakers aren’t eligible for the procedure since their devices may interfere with the information collected to create a sharp, 3-D image of the heart. Technologists and imaging specialists take care to ensure that patients who do warrant a coronary CT scan discontinue the use of certain medications and caffeine for a period in advance of the scan.

In most cases, patients are able to

go home immediately after a CT test, which can be administered by a nurse and one technologist. The scanner's small demand on professional resources at the hospital gives SMH the flexibility to direct critical care where it is needed at the moment. CT staff are on duty at Slidell Memorial 24/7 including weekends.

The addition of the 64-slice CT technology has added further momentum to Slidell Memorial's development as a center for medical education and development. Three SMH radiologists and two cardiologists have received special "Level II" certification in the advanced CT technology from the American College of Cardiology.

Peyton's team is also working to make sure that physicians throughout SMH and the community are aware of the advantages of the 64-slice scanner.

"We're seeing more doctors get on board with this advance as they see its benefits for patients and learn that ordering this procedure is just as easy as ordering any CT scan in the past," said CT Technician Joey Roby.

"They are especially pleased with another benefit of the 64-slice technology—that it makes follow-up testing much easier for our patients who have had heart bypass surgery in the past. We can quickly see if their bypass is still clear of obstruction, with less stress and risk," he said.

"In addition, health care education programs in the region are taking notice," Peyton said. "We serve as a clinical training site for the allied health program at Delgado Community College, which along with other schools is helping to train the next generation of professionals. The schools are a primary source of new CT technologists for Slidell Memorial."

As with many other advanced medical technologies, medical insurers have been playing catch-up with their evaluation and management of cardiac CT scanning coverage and costs. When the procedures were brand new, insurers provided no coverage, but that is beginning to change now that Medicare has established criteria for the scans. The coronary CT scans average about one-fifth the cost of a conventional coronary angiogram.

"This is much more than just a gee-whiz technology," Peyton said. "To me, it's the latest example of Slidell Memorial's commitment to excellence in healthcare for everyone in our community."



WHO BENEFITS FROM A CORONARY CT SCAN?

A doctor will know best whether a person may benefit from a 16- or 64-slice CT scan, but some of the relevant risk factors most common in men 45 or older and women 55 or older include:

- Sedentary lifestyle
- Elevated cholesterol
- Chronically elevated stress levels
- Family history of heart disease
- Elevated blood pressure
- Diabetes
- History of smoking or current smoker
- Obesity or post-obesity
- A patient with a questionable stress test result
- Chest pain when the cause is not clear

BACK ON THEIR FEET

INNOVATIVE SURGICAL TABLE HELPS HIP PATIENTS RECLAIM THEIR MOBILITY AND LIVES



By: Michelle Delery

For Marie, the changes in her mobility occurred so gradually over time that she almost didn't notice. She had battled osteoarthritis for nearly two decades, and become almost accustomed to dealing with the aches and pains in her hips and knees.

"I was 77 years old at the time and just wrote it off as the effects of old age," she said about the pain. However, her preoccupation with rebuilding after Hurricane Katrina, as well as the medication she had been taking for years, were not enough to keep the pain from significantly impacting her daily activities.

When simple things like putting away the groceries become almost unbearable for people like Marie, total hip replacement may be the best solution to reclaiming mobility, and the new arthroplasty surgical table being used by physicians at Slidell Memorial Hospital can make the procedure and the recovery a lot easier on patients and their families.

In conventional hip replacement surgery, the surgeon makes a 10- to 12-inch incision along the side of the hip to gain access to the patient's joint by moving muscle connected to the thighbone. For the average patient, the hospital stay after this procedure can be anywhere from three to 10 days and rehabilitation can last three to four months.

Anterior hip replacement surgery spares both nerve and muscle tissue. It requires a smaller incision—anywhere from four to five inches in length—while the joint can be replaced without detaching muscle from the pelvis or femur. As a result, the patient's hospital stay can be as short as two to four days and recovery time is reduced 50 to 75 percent.

Although the anterior approach can be performed using a standard operating table, it may be more difficult because of the need for complex patient positioning during the

POTENTIAL ADVANTAGES INCLUDE:

	Anterior Approach	Conventional Surgery
Average Hospital Stay	2-4 days	3-10 days
Smaller Incision	4-5"	10-12"
Less Muscle Trauma	No Muscular Detachment	Muscle Cut from Bone
Faster Recovery	2-8 weeks	2-4 months
Reduced Pain	✓	
Reduced Blood Loss	✓	
Reduced Tissue Healing Required	✓	
Reduced Risk of Dislocation	✓	
More Accurate Leg Length Control	✓	
More Rapid Return to Normal Activities	✓	

procedure. The newer anterior hip table allows the surgeon to precisely control the position of the patient during the procedure.

Dr. Charles Krieger is one of the only specialists in the area performing anterior hip surgery and the only one in Southeast Louisiana using the hana surgical table.



The table can also be used when performing hip scopes, and the fixation of hip, femoral and tibial fractures, all procedures that are most successful when the surgeon can manipulate patient positioning.

LESS PAIN, LESS SCARRING AND SHORTER RECOVERY TIME

Patients who use this approach for their hip replacement benefit in several ways. The smaller incisions used in the procedure can reduce how much blood is lost during surgery.

Since there is no disturbance of the lateral and posterior soft tissues using the anterior approach, there is immediate stability after the hip surgery.

“Anterior hip replacement allows patients to immediately bend their hip freely and bear full weight when comfortable, resulting in a more rapid return to normal activity.”

“After surgery, patients are instructed to use their hip normally without cumbersome restrictions, and in supervised therapy, patients are even able to go up and down stairs before their release from the hospital.”

As the anterior approach gains wider acceptance in hospitals throughout the United States there is no doubt that tables such as the Hana Hip and Knee Arthroplasty table will become more common. However, for now, there are approximately 100 Hana Hip and Knee tables in the country.

HIP REPLACEMENTS ON THE RISE

According to study findings reported in the April 14 issue of *Arthritis Care & Research*, the need for hip and knee replacement procedures in the United States will increase dramatically over the next seven years.

The study estimates that 600,000 hip replacements and 1.4 million knee replacements could be performed in the year 2015 if current trends persist.

One of the biggest reasons for the increasing trend is the desire of the increasing number of baby boomers to be physically active during their retirement years. In addition, more and more patients want the quality of life they can regain from procedures such as hip replacement. The stress on hip and knee joints caused by obesity, as well as the increasing population with arthritis, will also contribute to the number of people seeking joint replacement in the coming years.

There is no doubt that a minimally-invasive procedure that can produce faster recovery time will impact the number of people opting for total hip replacement surgery in lieu of the debilitating pain of joint problems and osteoarthritis. For patients like Maria, the anterior procedure means a return to everyday activities in a shorter amount of time so she is able to get back to enjoying life.

BENEFITS FOR THE PATIENT:

- Reduced tissue trauma
- Less pain
- Less medication
- Less scarring
- Normal hip mechanics
- Faster recovery
- Quicker return to normal function
- Little or no physical rehabilitation
- Reduced dislocation risk
- Earlier release from hospital

Recipe Rehab

Renovated home cooking for real life
BY CONSTANCE SNOW

Grilled Salmon with Summer Garden Salad

Serves 6, Total time: Less than 1 hour, Actual work time: 30 minutes

Grilled salmon and corn are natural partners, so it's lucky both are at their peak around the same time. In fact, fresh summer corn is so sweet and tender that it's fine to eat raw, as here, tossed with little cubes of uncooked zucchini. As an alternative, you could grill both before adding them to the salad for an extra element of toasty flavor and color.

For the salad:

1 garlic clove	1 tablespoon snipped fresh dill, or ½ teaspoon dried dillweed
¼ teaspoon salt	1 tablespoon minced fresh parsley
1 tablespoon extra-virgin olive oil	2 cups fresh or unthawed frozen corn kernels
1 tablespoon grainy brown mustard	2 small zucchini, diced
1 tablespoon fresh lemon juice	2 ripe tomatoes, seeded and diced, or 1 pint grape tomatoes, halved
1 teaspoon Splenda	Freshly ground black pepper
2 tablespoons minced scallion	

For the salmon:

Six 4-ounce skinless salmon fillets
Salt-free seasoning blend, such as Cajun seasoning or Jamaican jerk rub
1 tablespoon olive oil

MAKE THE SALAD: Mash the garlic and salt with a fork to make a paste in the bottom of a large salad bowl. Stir in the oil, mustard, lemon juice, and Splenda. Stir in the scallions, dill, and parsley. Toss with the corn, zucchini, and tomatoes. Season well with black pepper. Set aside for at least 30 minutes to allow the flavors to blend.

MAKE THE SALMON: Rub the fillets all over with the seasoning blend; refrigerate for at least 30 minutes. Just before cooking, lightly brush the salmon and the grate with the oil. Grill 6 inches from the heat source for 3 to 4 minutes per side. Serve atop the salad.

Plan ahead: The seasoned salmon and dressed salad can be refrigerated for up to 2 hours.

Per serving: 262 calories, 24.8g protein, 13.3g carbohydrate, 2g dietary fiber, 12g total fat (1.8g saturated fat), 63mg cholesterol, 218mg sodium. Carbohydrate choices: 0.8

Simple Salmon Souffle

Serves 3, Total time: 50 minutes, Actual work time: 20 minutes

Souffles have a reputation as disasters waiting to happen, the tearful newlywed's first flop, but they're actually very easy to make. All that's required is a flavorful base, whipped egg whites, a light touch for folding them together, and plenty of hot air. Just take note of these few essentials: Beat the egg whites only until they hold stiff peaks and have a glossy sheen. Otherwise, they will dry out and deflate. Don't bang the beaters on the side of the bowl or handle the dish roughly as it goes into the oven. Don't overbake, as a souffle should be moist—even slightly runny—in the center, and will fall flat if left in the oven too long. And be ready to serve the moment it comes out, as the dramatic puff will last only a minute or two before sinking.

Variations: Use fresh-cooked salmon in place of canned, or any flaky fish, or finely ground shrimp (or finely ground turkey ham, with a pinch of dried mustard instead of the lemon juice and dill). You could make this without any yolks at all, but just one helps the texture.

One 6-ounce can boneless skinless salmon, drained	1 teaspoon dried dillweed
One 6-ounce carton (¾ cup) plain lowfat yogurt	Freshly ground white or black pepper
1 egg yolk	5 egg whites, at room temperature
½ teaspoon fresh lemon juice	¼ teaspoon cream of tartar

PREHEAT the oven to 375°F. Coat a 1-quart souffle dish with nonstick spray, or grease very lightly with canola oil.

Using a fork, mash the salmon to a paste in a large bowl. Add the yogurt, egg yolk, lemon juice, and dillweed.

Season well with pepper; stir to combine. **BEAT** the egg whites and cream of tartar (if using) with an electric mixer on medium-high speed until stiff, but not dry. Fold into the salmon mixture with a flat whisk or rubber scraper, being careful not to deflate the whites. Gently pour into the prepared souffle dish. Bake for 20 to 25 minutes, until set and lightly browned on top. Serve immediately.

Plan ahead: You can refrigerate the salmon mixture, covered airtight, for several hours. The egg whites must be beaten immediately before baking.

Per serving: 143 calories, 19.7g protein, 4.6g carbohydrate, 0g dietary fiber, 4.5g total fat (1.6g saturated fat), 95mg cholesterol, 413mg sodium. Carbohydrate choices: 0.3

PERFECT PAN-ROASTED SALMON

- Always start with fillets that are rinsed and patted thoroughly dry. Fish that's wet or very cold will stick when pan-roasting.
- First, preheat the oven to 500°F; then heat a large, well-seasoned iron skillet on a medium-high burner for 2 or 3 minutes. When the pan is very hot, add a tablespoon of peanut or canola oil and swirl it around. Add the fillets, skinned sides up. Sear, without disturbing, for 2 minutes.
- Turn the fish over, then immediately transfer the skillet to the preheated oven. Roast until done, 4 to 6 minutes, depending upon the thickness of the fillets.

Salmon, New Potato, &

Asparagus Salad: To serve 4, combine 12 ounces cooked salmon, 1 pound quartered and cooked new potatoes, and ½ pound asparagus that has been cut into 2-inch pieces and microwaved for 1 minute. Whisk 1 tablespoon each fresh lemon juice and extra-virgin olive oil; add 2 teaspoons snipped fresh dill (or ¼ teaspoon dried dillweed) and freshly ground black pepper; toss with the salad.

Salmon Burgers: Coarsely chop raw skinned and boned salmon in a food processor. Season with grated lemon zest, snipped fresh dill or dried dillweed, and freshly ground black pepper. Cook patties in a nonstick skillet lightly coated with olive oil, about 4 minutes per side. Serve on wholegrain buns with thin slices of cucumber, tomato, and sweet red onion. Dress with nonfat mayonnaise spiked with Wasabi paste or horseradish.

Salmon Tacos: Roll grilled salmon in warm corn tortillas with chopped avocado and tomato, thin slices of sweet onion, salsa and/or nonfat sour cream. Add fresh cilantro, if you like. (Corn tortillas are recommended here because the flavor is better suited to the fish, but also because flour tortillas are generally much higher in sodium.)

SAUCES FOR SALMON

Minty Tomato & Cucumber

Relish: Cut 2 medium tomatoes in half crosswise; gently squeeze out the seeds and pulpy liquid; chop finely. Remove the seeds from ½ cucumber; peel it or not, as you wish; chop finely. Toss with 1 or 2 tablespoons each fresh lemon juice and minced fresh mint. Season with freshly ground black pepper. Set aside for at least 30 minutes to allow the flavors to blend.

Asian Vinaigrette: Stir together 1 tablespoon fresh lime juice, 1 tablespoon toasted sesame oil, 2 teaspoons reduced-sodium tamari or soy sauce, 2 teaspoons Splenda, 1 teaspoon finely grated fresh ginger, and red pepper flakes to taste (start with a pinch). Set aside for at least 30 minutes to allow the flavors to blend. Drizzle over grilled or steamed salmon (just about 1 teaspoon per serving), then sprinkle lightly with toasted sesame seeds.

Mango Salsa: Stir 2 cups chopped fresh mango with 1 tablespoon each fresh lime juice, minced red onion, and minced fresh cilantro or parsley. Season to taste with red pepper flakes or a seeded and minced fresh chile, such as jalapeño or serrano. Set aside for at least 30 minutes to allow the flavors to blend.

Architect, Medical Director Named

By: Chris Smith

One-stop, world-class cancer treatment close to home will soon be a reality for residents of Southeast Louisiana and beyond.

After an extensive national search, Slidell Memorial Hospital's leadership and Board of Commissioners recently selected AE Design as the architectural firm for design and construction of a new regional cancer center.

Marietta, Ga.-based AE Design, which specializes in oncology and diagnostic imaging facilities, has established itself among the nation's leading specialists in the field, completing more than 100 oncology facility projects in the world.

Daniel Chang, AE Design president, and Mike Palazzo, associate, will lead the project.

"We are honored and excited to be the selected architect for a comprehensive cancer center that will serve Slidell and surrounding areas," said Palazzo.

The company has assembled an experienced team of engineers for the project including Duplantis Design Group of Thibodaux, La.; Wardlaw and Lasseigne, LLC, Baton Rouge; CRS Engineering & Design Consultants, Birmingham, Ala.; and Louisiana Landscape Specialty, Inc., Baton Rouge.

Developing a cancer center with the scope of care that will be available at SMH's new cancer center requires the cooperation of many different groups who are working closely with AE Design during the design and construction of the center. The Cancer Program Working Group, an internal team including physicians, nursing staff, Commissioners and other hospital employees, helps ensure the facility incorporates the efficiencies and attributes that best serve the patients and medical specialists helping them fight their disease. The center, which will break ground at the end of 2008, will host advanced technologies such as image guided radiation therapy, nanotechnology for drug delivery, specialized ultrasound, genetic testing and more.

Even before ground is broken

for the cancer center, SMH teams are increasing the pace and scope of preparation for the launch of a regional treatment program that offers comprehensive coordinated care to cancer patients. After completing training on the newly purchased High Dose Rate Brachytherapy Unit in May, the hospital's radiation oncology staff began using the device to treat cancer from the inside-out, targeting radiation directly at tumors. This high intensity treatment, also known as "implant radiation," delivers radiation through a small catheter in minutes and does not require hospitalization. Patients receive a course of 10 treatments over five days rather than over a period of weeks or months, said Dr. Stephen I. Hightower, Radiation Oncologist at SMH. "For certain types of cancer, this treatment is a very elegant and effective way of treating cancer," Dr. Hightower said. HDR brachytherapy is one of many capabilities required of community cancer centers.

SMH also has invested in new equipment to increase its diagnostic capabilities through the introduction of PET/CT scan and Breast MRI services. JoAnn Forsyth, newly appointed administrator of the new cancer center, said the availability of PET/CT (Positron Emission Tomography combined with Computed Tomography) imaging services in the region is an exciting development.

A PET/CT scan provides information not provided by other types of imaging. It is especially useful in detecting certain kinds of common cancers such as those of the lung, breast, colon, ovary, head/neck and melanomas.

Dr. Kishore Kamath, a radiologist, added: "PET/CT provides unique information about the activity in the cancer cells and enables the detection of cancer before it is detected by other means. It also provides information about the response to given treatment, thereby allowing the cancer specialist to utilize the most optimal treatment for a given patient."

Like PET/CT, Breast MRI is a non-invasive procedure that doctors can use to determine what the inside of the

breast looks like to provide additional information for treatment and surgical decisions. MRI has been shown to detect small breast lesions that are sometimes missed by mammography. Each exam produces hundreds of cross-sectional images of the breast. This evolving technology will be a great benefit in particular for patients with prior instances of breast cancer, women with dense breast tissue or implants.

These innovations are just the latest in the hospital's long-standing positioning as the leading-edge cancer services provider in the region. Slidell Memorial's Oncology Program has been recognized by the Commission on Cancer of the American College of Surgeons as offering the very best in cancer care. SMH again has earned three-year approval by the ACS Commission on Cancer, which recognized the program as having earned a Com-mendation level of compliance.

COC-approved cancer programs represent less than 25 percent of all hospitals. For patients, receiving care at a COC-Approved cancer program ensures they will receive comprehensive care, including a range of state-of-the-art services and equipment; a multi-specialty team approach; information about ongoing clinical trials and new treatment options; and access to cancer-related information, education and support.

The SMH regional cancer center will meet the growing demand for comprehensive cancer diagnosis and treatment close to home for families in the area. Planners expect the center to attract patients from throughout the Gulf South region. It will be easier to get to, yet have the same level-or better-technology than larger facilities in other states or regions.

Funding for the center's creation will come from \$17.5 million in excess funds available from a 2003 tax millage that was re-dedicated with voter approval in late 2007. Once completed, patients will be able to have diagnostic work-up, outpatient treatment and support services all under one roof.



EVENTS IN OUR COMMUNITY

July 4
Slidell Heritage Festival
 Slidell, Old Town-Heritage Park. Music, food, games, crafts, and fireworks. (985) 643-1234

July 4
St. Bernard Salutes America Fourth of July Celebration
 Chalmette, Government Complex. Food, music and fireworks display.

July 4
Go Fourth on the River
 New Orleans, Woldenberg Park. Riverboat rides, music, food and fireworks. 581-4629

July 4
Star Spangled Celebration
 Baton Rouge, USS Kidd and Nautical Center, 305 S. River Road. Family Independence Day celebration with food, music, an air show, tours of the vessel and fireworks. (225) 342-1942.

July 5
Picayune Trade Days
 8:00am-4:00pm
 Greater Picayune Chamber of Commerce, 201 Highway 11 North, Picayune. Call 601-798-3122 for information.

July 5 & 19
Preparation for Birth and Parenting* 8:30am-3:30pm
 SMH 12th St. Annex Room A/Fee \$50 per couple if not pre-registered at SMH
 For first-time parents who are at least six months pregnant. Topics include: stages of pregnancy, nutrition, pain management options, hospital stay and recovery, possible complications, and basic newborn care (bring a pillow.)

July 9
Slidell Mothers of Twins & Multiples*
 7:30pm
 SMH Founders Building Classroom, 1150 Robert Blvd., Slidell
 Mothers of Twins and Multiples meet monthly to share experiences and learn more about the joys of raising children. For more information, contact Julie Lavigne at (985) 788-7707.

July 12
Breastfeeding Clinic*
 9-10:30am
 SMH 12th St. Annex Room A/Fee \$25 if not pre-registered at SMH
 Certified Lactation Consultants offer support and encouragement as they discuss the advantages of breastfeeding, how to get started, prevent problems and what to expect.

July 13
Big Brother Big Sister*
 3:30-5:30pm
 SMH 12th St. Annex Room A/Fee \$10 per family due at registration
 A fun class to prepare children ages 3-10 for the arrival of their new sibling. Mom should be at least 7 months pregnant.

July 11-13
Louisiana Catfish Festival
 Des Allemands, St. Gertrude Catholic Church. Music, games, rides, catfish-cooking and catfish-eating contests. (985) 758-7542

July 17
Sign, Baby, Sign!*
 7:00-9:00 pm
 Alice Fish-Baratinni, MA
 SMH Founders Bldg Conference Room, 1150 Robert Rd./Fee \$5
 Can normal babies and toddlers (6-24 months) learn to communicate before they can speak? Yes, they can! They can also increase their IQ by 10-12 points. To register, call (985) 661-2657.

July 19
Christmas in July
 Ponchatoula's Historic District .Come listen to a variety of live music, stage will be located right next to Ole Hardhide. Outdoor Art & Crafts Festival. Shop early for Christmas. For more information call 1 (800) 617-4502.

July 19
Parkinson Support Group*
 9:30am-12:00pm
 SMH Founders Bldg Conference Room/1150 Robert Blvd
 Third Saturday of every month, for additional information call Larry Dellagar at (985) 863-2390.

July 21
Stroke Support Group*
 5:30-6:30pm
 SMH Rehab Unit Meeting Room, 1st floor/FREE
 The group will meet on the third Monday of each month. For more information, call Sarah Lyons, LCSW, at (985) 643-2200.

July 21
New Diabetes Support Group*
 6:30-7:30pm
 SMH Founders Bldg Conference Room/1150 Robert Blvd
 Group will meet every third Monday of the month.

July 22
Infant & Child CPR*
 6:00-9:00pm
 SMH Founders Bldg Conference Room/1150 Robert Blvd./Fee \$20.00 per person/\$30.00 per couple.

July 24
Babysitting Workshop*
 9:00am-3:30pm
 SMH Founders Bldg Conference Room, 1150 Robert Blvd./Fee: \$40.00
 Including: first aid tips, preventing injuries, behavior management, infant care and diapering, safety for the sitter, babysitting as a business, child rescue breathing. Teens need to bring a sack lunch. Pre- registration is required by calling (985) 661-2657.

July 25-26
Feliciana Hummingbird Celebration
 St. Francisville, St. Francisville Inn, 5720 N. Commerce St. Evening program and reception, hummingbird banding and garden tours. (800) 488-6502 or (225) 635-6502.

July 31 - August 3
Satchmo SummerFest
 Old U.S. Mint, 400 Esplanade Ave.
 Celebrates Louis Armstrong with outdoor concerts, seminars, children's activities, a club crawl and second-line parade. 522-5730, www.satchmosummerfest.com

August 1
Literacy and Lullabies: Pajama Story Time for Preschoolers and their Parents*
 Angie Dick, M.A.
 6:00-7:30 pm
 SMH Founders Building Conference Room/1150 Robert Blvd/ Fee: \$5.00 per Family. To register, call (985) 661-2657

August 2
Picayune Trade Days
 8:00am-4:00pm
 Greater Picayune Chamber of Commerce,
 201 Highway 11 North, Picayune. Call
 601-798-3122 for information.

August 2 & 16
Preparation for Birth and Parenting* 8:30am-3:30pm
 SMH 12th St. Annex Room A/Fee \$50 per couple if not pre-registered at SMH
 For first-time parents who are at least six months pregnant. Topics include: stages of pregnancy, nutrition, pain management options, hospital stay and recovery, possible complications, and basic newborn care (bring a pillow.)

August 4
4th Annual Red Beans 'N Rice Cook-off - Benefiting United Way
 11:00am-2:00pm
 Slidell Auditorium, 2056 Second St., Slidell/ Fee: \$50.00 per team
 For information on entering your team or becoming a corporate sponsor please contact Chris Kaufmann at 985-646-4387 or John O'Neil at 985-264-2046.

August 6
Slidell Mothers of Twins & Multiples*
 7:30pm
 SMH Founders Building Classroom, 1150 Robert Blvd., Slidell
 Mothers of Twins and Multiples meet monthly to share experiences and learn more about the joys of raising children. For more information, contact Julie Lavigne at (985) 788-7707.

August 9
Infant & Child CPR*
 9:00-12:00pm
 SMH Founders Bldg Conference Room/1150 Robert Blvd/Fee \$20.00 per person/\$30.00 per couple.

August 9
Breastfeeding Clinic*
 9-10:30am
 SMH 12th St. Annex Room A/Fee \$25 if not pre-registered at SMH
 Certified Lactation Consultants offer support and encouragement as they discuss the advantages of breastfeeding, how to get started, prevent problems and what to expect.

August 10
Big Brother Big Sister*
 3:30-5:30pm
 SMH 12th St. Annex Room A/Fee \$10 per family due at registration
 A fun class to prepare children ages 3-10 for the arrival of their new sibling. Mom should be at least 7 months pregnant.

August 13
Your Amazing Newborn*
 6-8pm
 SMH 12th St. Annex Room A/Fee \$10 per couple if not pre-registered at SMH
 This class is especially helpful for first-time parents or those who would like to review how to care for newborns.

August 13 & 14
AARP Mature Driving Class*
 8:00am-1:00pm
 SMH Founders Bldg Conference Room/1150 Robert Blvd/Fee \$10.00 per person
 Call (985) 649-8689 to register, seating limited to the first 25.

August 16
Parkinson Support Group*
 9:30am-12:00pm
 SMH Founders Bldg Conference Room/1150 Robert Blvd
 Third Saturday of every month, for additional information call Larry Dellagar at (985) 863-2390.

August 18
New Diabetes Support Group*
 6:30-7:30pm
 SMH Founders Bldg Conference Room/1150 Robert Blvd
 Group will meet every third Monday of the month.

August 18
Stroke Support Group*
 5:30-6:30pm
 SMH Rehab Unit Meeting Room, 1st floor/FREE
 The group will meet on the third Monday of each month. For more information, call Sarah Lyons, LCSW, at (985) 643-2200.

Aug. 28-Sept. 1
Louisiana Shrimp and Petroleum Festival
 Downtown Morgan City. Louisiana's oldest chartered harvest festival with Cajun music, swamp rock, zydeco, country, rhythm and blues, shrimp cook-off, arts and crafts, fireworks, children's village, blessing of the fleet. (800) 256-2931/www.shrimp-petrofest.org.

WEEKLY MARKETS
Mandeville Trailhead Community Market
 Every Saturday, 9am-1pm
 Held weekly, year-round, rain-or-shine, the Community Market consists of seasonal farmer's market items, artisan's wares; unique gifts; entertainment; cooking demonstrations and activities for all.

Camellia City Farmers Market
 Every Saturday, 9am-1pm
 Griffith Park, Olde Town Slidell
 Community market featuring local specialties; regionally-grown produce; cooking demonstrations; live local entertainment and more.

Ocean Springs Flea Market
 Saturday, 9am-1pm
 Depot Parking Lot, Downtown Ocean Springs, Miss.
 Organic produce, plants, prepared foods and much more!
 Picayune Main Street, Inc. is sponsoring the "First Friday" Arts & Gift Fest, which takes place the first Friday of each month between June and September. Evening shopping, dining, artists in shops.



1001 Gause Blvd.
 Slidell, Louisiana 70458
 (985) 643-2200
 www.SlidellMemorial.org

