

HEALTH NEWS *from*

SPRING 2017

texoma

MEDICAL CENTER

A mammogram **SAVED** *Gloria's life*

*"I had the best experience at the
TMC Breast Care Center!"*

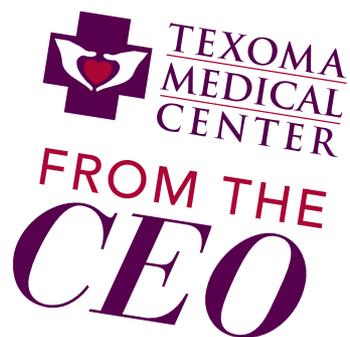
**Hope for patients
with severe asthma**
*Terri Steward has a new
"breath" on life*

**Seniors: living well
with heart failure**
*Adding years to your
life with proper care*

*Gloria Unerfusser enjoys an
afternoon out doing one of her
favorite things - fishing!*



COMPLIMENTS OF
**TEXOMA
MEDICAL
CENTER**



It takes a team effort to provide an exceptional patient experience, and it is something we strive for every day. So it was quite rewarding to learn that Texoma Medical Center's Breast Care Center ranked in the top one percent of Outpatient Centers for patient satisfaction in a national survey conducted by Press Ganey. Gloria Unerfusser can certainly attest to the care she received as described in her story on page 6.

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Terri Steward no longer struggles to breathe
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Is it time for a knee replacement?

We pride ourselves on continually expanding our services as the community grows, and in this issue, we feature several services new to TMC, such as using radiofrequency ablation to treat spinal tumors. Learn more about it on page 3. Patients with severe asthma, like Terri Steward, are seeing a life-changing difference with bronchial thermoplasty treatment. You can read Terri's story on page 4.

Other topics you may find of interest include surgical and non-surgical facial rejuvenation; what you can do to "spring clean" your lifestyle and improve your health; and what to do if you think you might need a knee replacement. In our Senior Advantage section, learn how our Transitional Care Program helps after your discharge from the hospital, and also how to live well with heart failure.

And if you haven't seen it yet, be sure to visit our newly updated website at www.texomamedicalcenter.net for more information on services, patient testimonials, support groups and community events.

As always, thank you for entrusting us to care for you and your family, and have a wonderful spring.

Ronald T. Seal
Chief Executive Officer
Texoma Medical Center

NEW PODCAST SERIES NOW AVAILABLE

Get your health information on the go or right on your computer with a series of educational podcasts called TMC Health Talk. Medical professionals at Texoma Medical Center provide information on topics including back pain, facial rejuvenation, learning the signs of stroke, and early heart attack care.

Podcasts are available to listen from the site or you can conveniently download to any device and listen at your leisure. Hear the latest by visiting www.texomamedicalcenter.net/podcasts.



Radiofrequency ablation treatment now available for *spinal tumors*

Minimally invasive technology, close to home



Brian Rose, MD, FAAOS
Orthopedic & Spine Surgeon



Michael Molleston, MD
Neurosurgeon, TexomaCare

A treatment system specifically used for treating painful tumors that have spread to the spine from cancer in other parts of the body is now available at TMC. Orthopedic Surgeon and Chief of Staff at Texoma Medical Center Brian Rose, MD, FAAOS, says he has been treating patients for about six months.

TexomaCare Neurosurgeon Michael Molleston, MD, says the treatment serves a dual purpose. "Radiofrequency ablation enables us to treat tumors using a small incision. Once the tumor is destroyed, we strengthen and stabilize the spine by

filling in the affected areas with a cement-like material. The procedure usually takes less than one hour and following a short time in recovery, patients can go home."

Dr. Rose states that the person's pain level is greatly reduced. For older patients with other health conditions, the minimal side effects are a plus. This often allows the patient to proceed with radiation therapy and/or chemotherapy without severe pain.

Enhancing treatment options for patients

The new treatment is an extension of kyphoplasty, a procedure already performed at Texoma Medical Center for patients with spinal pain due to compression fractures that result from osteoporosis. "Kyphoplasty is a very similar procedure. The difference is that no ablation is needed. The patient's vertebrae need support, so we fill any fractures or pockets with the cement-like substance, and patients can get relief fairly quickly," says Dr. Rose. "Many patients who previously rated their pain as a '10' tell us it dropped to a '2'."

Dr. Molleston says it's exciting to be able to offer these solutions. "We are trained to be as minimally invasive as possible, which equates to minimized pain and quicker recovery for the patient. These two procedures fall right in line with that." ■

Individual results may vary. There are risks associated with any surgical procedure. Talk with your doctor about these risks to find out if minimally invasive surgery is right for you.

The neurosurgeons and orthopedic and spine surgeons at TMC specialize in the nerves, brain and spine. For more information, visit www.texomamedicalcenter.net/neurology. To find a doctor, call Direct Doctors Plus® at 903.416.DOCS (3627).

Breathing EASIER

*“Having this procedure done
has made such a difference!”*

– Terri Steward

Ever since Terri Steward was treated for stage one lung cancer three years ago, she has suffered from chronic obstructive pulmonary disease (COPD) and asthma. She has also had to limit activities she loved, such as riding her motorcycle, because she often found it difficult to breathe. ►





Sanober Kable, MD
Pulmonologist

As a result, her conditions would often cause complications that required hospitalization. But in the fall of 2016, it was during a hospital stay that her pulmonologist, Sanober Kable, MD, told her about a procedure that may be of benefit – bronchial thermoplasty.

Says Dr. Kable, “With bronchial thermoplasty, we treat the individual bronchial tubes using a controlled heating element. The heat breaks down the thickened lung tissue, which allows better airflow. Three outpatient treatments are done under general anesthesia, three weeks apart. The first one is done in the lung’s right lower lobe, then we treat the lower left lobe, and finally, the upper right and left lobes.”

Terri learned that steroid use for her COPD contributed to the increased lung tissue thickness. “Dr. Kable told me about the bronchial thermoplasty procedure that was newly available at Texoma Medical Center, and how she was the only doctor there doing the procedure. I was able to have my treatment in December 2016.”

Dr. Kable says people with severe, persistent asthma are among the best candidates for bronchial thermoplasty. “Despite optimal maintenance therapy many patients are on, they have to go in to the doctor too frequently, just to be able to breathe,” she says. “This treatment allows patients to reduce the amount of rescue medications they need on a daily basis, which is much healthier for them. I have seen the ‘before’ and ‘after,’ and many of my patients have had significant improvement.”

Terri says she noticed a difference after the first treatment, but had more major improvements after the second and third ones. “A simple cold used to put me in the hospital. And even though I started with a cold after having the thermoplasty done, I did just fine and didn’t need to go to the hospital. I truly feel that is a result of the treatment.” Terri has also reduced her daily breathing treatments and has not needed her rescue inhaler as much.

Dr. Kable notes many patients start feeling better after a week following the first treatment, and that they should really notice a difference a month after all three procedures. She currently performs three to five treatments a week.

As a home care nurse, Terri often has to lift and help maneuver patients. She now finds that doing her job is much easier, and recommends the treatment for anyone with asthma. “I see about seven patients a day, and I have talked to some of them about it. Most of the nurses I work with have never heard of it, but we are all now sharing the information with our patients who suffer from severe asthma,” says Terri.

Another positive, Terri explains, is that she can be more involved in other activities, such as walking with her sister, and getting back on her bike. “I used to have to tell my sister to slow down on our walks together, now I don’t have to. Just doing normal, everyday activities such as cooking and cleaning is so much better, not being out of breath,” she says.

Terri says the care she received at Texoma Medical Center was beyond excellent. “The nurses explained everything that was going to happen and put me at ease, and Dr. Kable is simply the best at what she does. I highly recommend her and the hospital,” says Terri. “I have been here a lot, and it is so important to this community that TMC is here. The nursing care here makes the hospital, and I am so grateful for the fantastic crew that took care of me!” ■



Terri and her sister, Myra Neal, take advantage of the nice weather and go for a walk, something she used to have trouble with prior to her procedure.

Do you need help managing chronic breathing issues? Call 903.416.DOCS (3627) to find a doctor.



Optimizing the patient experience at *TMC's Breast Care Center*

*"They were so good to me.
I felt like I truly mattered ..."*

– GLORIA UNERFUSSER

Every year, Gloria Unerfusser goes faithfully for her mammogram. In May 2016, she went to the TMC Breast Care Center, where doctors noticed a suspicious lump and asked her to come back for an ultrasound. Not comfortable with their findings, they recommended a core needle biopsy. Nurse Navigator Angela Gregory, RN, scheduled the procedure, and was with Gloria the whole time. ►

Gloria encourages everyone to get their annual mammogram. "I am so thankful for my treatment at TMC's Breast Care Center."

The TMC Breast Care Center has consistently ranked in the Top 1% of Outpatient Centers for patient satisfaction as measured by Press Ganey national surveys. Press Ganey administers surveys by partnering with more than 11,000 healthcare organizations globally to create and sustain high performance and improve the overall patient experience.

Angela's role is a very special one. As the nurse navigator, she is specially trained to educate patients so they can make the right decision for their care. She is also the central contact and support person for patients, helping to locate resources and schedule tests, biopsies, surgeries and appointments. "I get to know the patients personally and help them feel at ease," says Angela.

Gloria's results indicated the lump needed further evaluation. While not a diagnosis of cancer, Gloria was advised to have the lump removed. "I had the surgery at Texoma Medical Center, and Angela stayed with me until I was asleep," says Gloria. "Everything was explained to me in detail, and I felt comfortable that the doctors and nurses would take good care of me."

When the tests came back indicating the lump was cancerous, Gloria was nervous. "I wasn't sure what to think at first, but I am a positive person, and I knew it would turn out okay," she says. "I was referred for radiation treatment as a precaution, and I had minimal effects from it. Even with my surgery, I had no real pain, just a little discomfort. I never felt bad throughout the whole experience – I am so lucky!"

Angela says Gloria is one of those patients you don't forget. "She was like a ray of sunshine whenever she came in. She was always positive, always smiling! Her attitude is what helped her get through her diagnosis and treatment," she says.

Gloria sees her oncologist every three months for blood work and an ultrasound. She says the community is very fortunate to have Texoma Medical Center, the Breast Care Center and all of the providers.

"The setting in the Breast Care Center is like a spa, and very comforting and inviting. They also have warm robes, snacks and beverages, and a very nice waiting room," she says. "I had an exceptional experience with the staff at both facilities, and I highly recommend them to everyone," says Gloria.

"Our patients are our priority. We see about 40 to 50 women a day and have been getting referrals from doctors outside our area. We focus on the patient experience, and our recent ranking by Press Ganey as being in the top one percent of outpatient centers nationally for patient satisfaction supports that," Angela says.

Gloria hopes that all the women reading her story will use it as a reminder to make an appointment for their mammogram. "That is how I found my cancer early, and I am so grateful I had everything done right here at home." ■

Early detection is one of the best defenses against breast cancer. The Breast Care Center's Mammogram Reminder Program makes it easy. Visit www.texomamedicalcenter.net/reminder to sign up for a reminder to schedule your yearly mammogram.

Comprehensive breast care, close to home

TMC Breast Care Center offers a variety of imaging and diagnostic services to help detect breast cancer in the earliest stages, all in a spa-like setting. The Center is staffed by skilled technicians, a dedicated female radiologist and breast surgeons.

Diagnostic tests include:

- Bone density screenings
- Digital mammography
- Diagnostic mammograms with ultrasound
- Stereotactic biopsy
- Ultrasound-guided biopsy
- Needle localization

The TMC Breast Care Center is located at 5004 Pool Road, Denison, TX 75020.

Appointments are available from Monday through Friday, from 7:30 a.m. to 5:00 p.m., and on Saturday from 9:00 a.m. until noon for screening mammograms only.



To make appointment for a mammogram, call 903.41.MAMMO (903.416.2666).



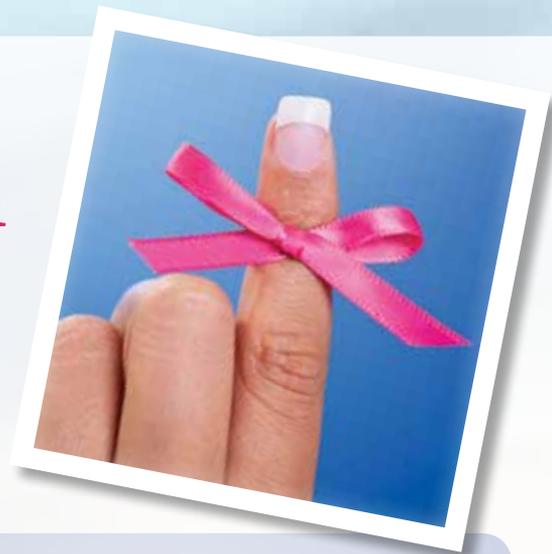
TMC BREAST CARE CENTER

The TMC Breast Care Center is the region's only Breast Imaging Center of Excellence and is fully accredited by the ACR in mammography, stereotactic breast biopsy, breast ultrasound and ultrasound-guided breast biopsy.



Breast self-exams and routine screenings

Early detection can make a difference



According to Breastcancer.org, an estimated 252,710 new cases of invasive breast cancer are expected to be diagnosed in women in 2017. Early detection is a key factor in winning the battle against breast cancer.

Doing regular breast self-exams, along with routine screenings, can help you detect changes or anything suspicious. Examine breasts when they are not tender or swollen, and try to do it at the same time each month.

How to conduct a breast self-exam

1. Lie on your back and place your right arm behind your head. Take the finger pads of your three middle fingers on your left hand and use three levels of pressure to feel for lumps in the right breast. Light pressure for surface tissue; medium pressure for deeper tissue; and firm pressure closer to the chest wall and ribs.
2. Move in an up-and-down pattern, beginning from the underarm and moving across the breast to the middle of the chest bone. Go down as far as the ribs and up as far as the collarbone. Repeat on the left breast.
3. Stand in front of a mirror with your hands pressed firmly on your hips and look at your breasts. Look for any changes in size, shape or contour. Also check for dimpling or scaliness of the nipple or breast skin.

NOTE: If you have breast implants, learn where the edges of the implants are located so you don't mistake it for a lump.

Screening recommendations for women at **AVERAGE** risk for breast cancer*

- Option to begin screening mammogram every year: women between ages 40 – 44
- Yearly mammogram: women between ages 45 – 54
- Mammogram every other year or yearly: women ages 55 and older

Women at average risk have no personal or family history of breast cancer; no increased risk from a genetic mutation, such as BRCA gene; and no radiation therapy to the chest before age 30.

NOTE: Be aware of how your breasts normally look and feel. If you notice any changes, let your doctor know right away.

Screening recommendations for women at **HIGH** risk for breast cancer*

- Yearly MRI and a mammogram

Women at higher than average risk have the BRCA1 or BRCA2 gene mutation; have a first-degree relative (parent, brother, sister, or child) with a BRCA1 or BRCA2 gene mutation, and have not been genetically tested; and have had radiation therapy to the chest between the ages of 10 and 30 years.

NOTE: Women who have a lifetime risk of breast cancer of about 20-25 percent or greater, based on American Cancer Society risk assessment tools are considered higher than average risk.

*The American Cancer Society



PUTTING YOUR *best face forward*

*Surgical and non-surgical options
for facial rejuvenation*



As we age, the collagen and elastin in our skin starts to break down, leaving behind visible lines and wrinkles, especially on our face. Excessive sun exposure also contributes to aging skin. But turning back the hands of time does not always involve going under the knife.

Minimally invasive, non-surgical options



Terry Yeung, DO
Ear, Nose, Throat
Specialist/
Plastic Surgeon,
TexomaCare

Ear, Nose, Throat Specialist and Plastic Surgeon Terry Yeung, DO, says injectables are a popular choice. Products such as botulinum toxin (BOTOX®), hyaluronic acid (NaPCA) and collagen are usually used as fillers. "BOTOX temporarily paralyzes the facial muscles, but it only works for certain areas, such as the forehead, between eyebrows, crow's feet on the sides of the eyes and smile lines around your lips," he says. "The treatment usually lasts three or four months, but it varies from person to person."

Hyaluronic acid is naturally occurring in the body, but diminishes with age. It is commonly injected in areas that require volume, such as the cheeks. "The fat pads on the cheek bones drop with gravity over time. Hyaluronic acid is infused high on the cheek bone, giving it more volume to drape over the bone," says Dr. Yeung. For those looking to get rid of a double chin, there is a new FDA-approved injectable that works only on the fat cells under the chin.

The facelift and other surgical procedures

If you want a more long-term solution, there are many surgical procedures, depending on the look you are trying to achieve. There are different kinds of facelifts, designed to create a more smooth and youthful contour. "We can do a full facelift for a more prominent change, or just work on certain areas, like the eyebrows or upper and lower eyelids," he says.

Liposuction is another procedure that can be done in conjunction with plastic surgery on the neck and chin area. Some people with a double chin want the fat removed and the skin around the neck area tightened. The end result can be a smooth, tighter neck surface.

To keep skin healthy, especially following a procedure, Dr. Yeung recommends using a sunscreen with an SPF of at least 30 at all times while outdoors. "The sun can be extremely detrimental, and can accelerate wrinkles and thinning of the skin. The closer you live to the equator, the more damaging it can be," he says.

Dr. Yeung's ultimate goal is to make the surgical techniques fit the patient's face and look natural, as well as coincide with the patient's expectation. With all procedures, Dr. Yeung consults with patients about their expectations to recommend the right procedure. "The decision is based on what will give the best results for that person. More surgery does not mean a more youthful appearance," he says. "Finding the right doctor is half the battle. Many people select a doctor based on other patients' positive results, but ultimately, you need to be comfortable with the surgeon." ■



**Looking for a new physician? Call Direct Doctors Plus®,
our free physician referral line, at 903.416.DOCS (3627).**

*Individual results may vary. There are risks associated with any surgical procedure.
Talk with your doctor about these risks to find out if plastic surgery is right for you.*

Give your health a spring cleaning!

A MULTI-FACETED APPROACH TO A NEW YOU

Each year, spring cleaning becomes a ritual for many with the change in seasons and arrival of warmer weather. And while people associate it with giving the house a good cleaning, you can also focus on good health.



Monica Woodall, DO
Family Medicine,
TexomaCare

START WITH A GOOD MINDSET

There are three key components involved in creating a new you – mental health, food and exercise. “Once you decide you want to live a healthier lifestyle, you have to have realistic expectations and goals, or you can set yourself up for failure,” says Monica Woodall, DO, Family Medicine Specialist with TexomaCare-Durant. “The word ‘diet’ should not even be used. Changing the way you are going to eat is a lifestyle change, and it will evolve over time.”

GET UP AND GET MOVING!

Exercise is important because it burns calories, helps with strength and stamina, and is a great way to relieve stress. Dr. Woodall suggests starting with an activity you like, but check with your doctor before you begin any exercise program. “If you like walking, then walk. Start slow and work up to increasing your speed and the length of time,” she says. “You don’t need to join a gym to exercise. Surround yourself with people who support you.”

LET FOOD BE YOUR MEDICINE

Eating clean, whole food and avoiding processed foods is a great way to lose weight and nourish your body. Dr. Woodall suggests eating more fresh fruits and vegetables and cut out processed sugar, soda and empty calories. “There is a big misconception that fat is bad, but really, your body needs ‘good’ fats to properly function, such as those found in avocados, coconut oil, nuts and seeds,” she says. “It’s the partially hydrogenated fats and other fats found in processed foods that are not good for you.”

KEEPING AN EYE ON METABOLIC SYNDROME

Dr. Woodall explains she proactively screens and treats her patients for Metabolic Syndrome, which is becoming more prevalent. The National Cholesterol Education Program defines Metabolic Syndrome as someone having at least three of the following components: abdominal obesity, fasting blood sugar greater than 100, blood pressure greater than 130/85, HDL cholesterol less than 50 for women/40 for men, or triglycerides greater than 150. If you are on medication for any of these components, that also counts toward the criteria. “I advise them if they don’t take care of it now, they may end up with diabetes, a heart attack or stroke down the road,” she says. “It just takes a little effort and a different mindset to start on the journey to good health, and I am here to help them, one step at a time.” ■

TexomaCare’s family medicine physicians are trained to diagnose and treat common illnesses and conditions. To find a doctor for yourself or your family, call 903.416.DOCS (3627).





**Health and wellness information
for adults age 55 and older**

TRANSITIONING TO POST-HOSPITAL CARE

When it comes time to be discharged from the hospital, members of the Transitional Care Program at TMC work to ensure patients are being placed in the most appropriate setting so they can continue with their recovery.

Sherri Timms, DNP, RN-BC, oversees the program, and Transitional Care Coordinators Laura McMeley, RN, BSN, and Sue Zanne Petersen, RN, assess and provide educational needs for both patients and their caregivers.

Sue Zanne says Laura visits each patient in the hospital before they are discharged, then lets her know who would benefit from education. "We want to make sure they are set up to receive appropriate care after they leave the hospital to prevent them from having to be re-admitted to the hospital," she says. "Sometimes a home care nurse will need to stop in for a few visits, or the patient may need a couple of weeks of in-home physical therapy. Working together as a team helps to have the best transition of care for our patients."

For more information on home health services, call 903-416-5500, or visit www.texomamedicalcenter.net/homehealth.

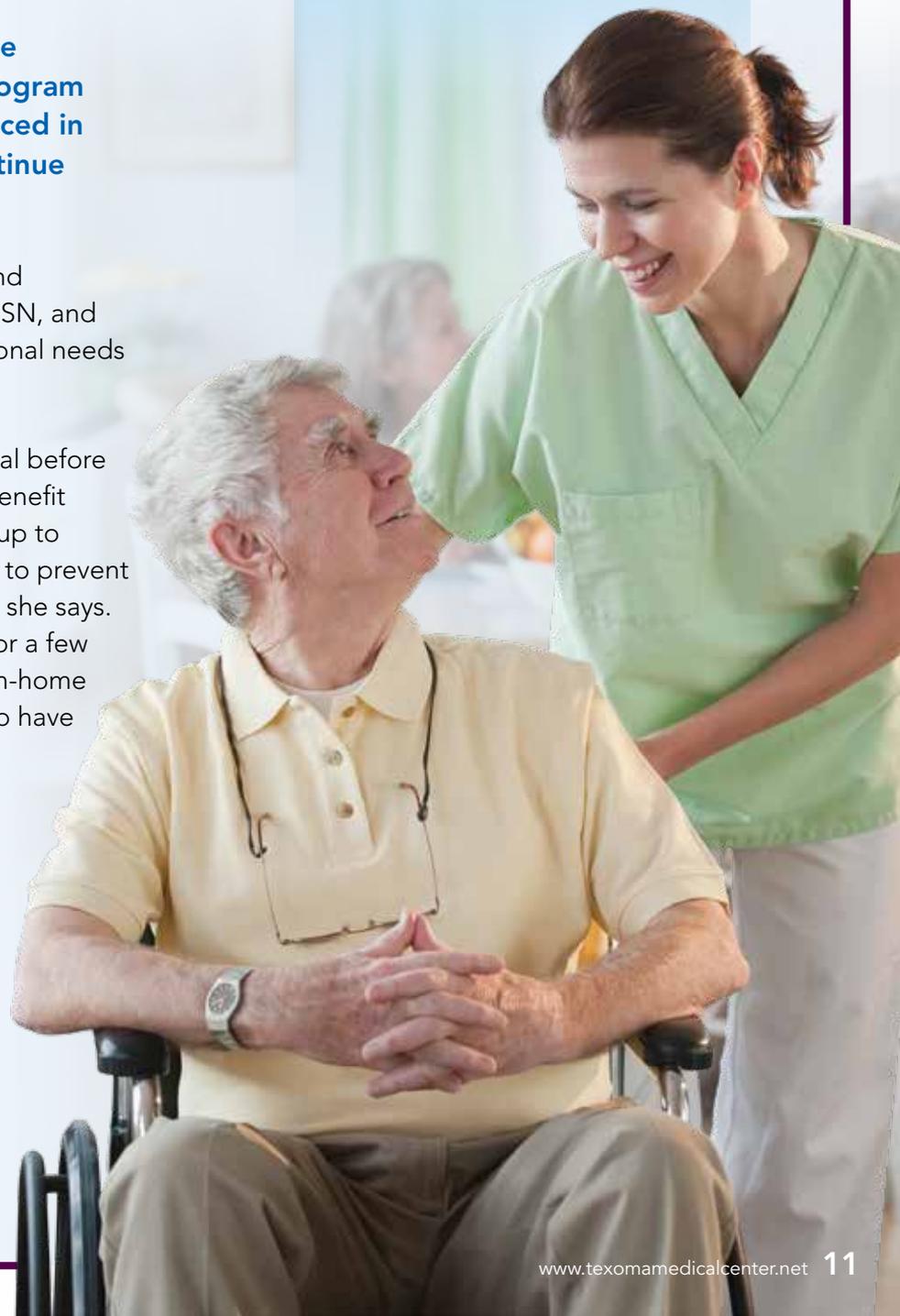
Join Senior Advantage –

It's Free!

The TMC Senior Advantage Program is open to those age 55 and older. As a member, you get access to:

- Health screenings
- Seminars and workshops
- Cafeteria and gift shop discounts
- *Health News* newsletter and more

For more information on Senior Advantage, call 903.416.55GO (5546).



Living well with **HEART FAILURE**



Winston Marshall, MD
Interventional
Cardiologist,
TexomaCare

Heart failure affects close to 6.5 million Americans and is the leading cause of hospitalization in people older than 65.*

But what does having heart failure mean?

Transitional Care

Coordinator Sue Zanne Petersen, RN, and Interventional Cardiologist Winston Marshall, MD, explain the basics and how to have a good quality of life while living with heart failure.

“Having heart failure means that the heart's ability to pump blood out of the heart has weakened, causing blood to move through the heart and body at a slower rate, which raises pressure in the heart,” says Sue Zanne. “The heart cannot pump enough oxygen and nutrients to meet the body's needs.”

Dr. Marshall adds that when the heart is not able to keep the blood moving efficiently, fluid can also build up in the arms, legs, ankles, feet, abdomen, lungs or other organs, and breathing may become difficult. ►



As an Accredited Chest Pain Center with PCI, Texoma Medical Center is recognized by the Society of Cardiovascular Patient Care for meeting or exceeding national care standards for acute cardiac medicine.

*American Heart Association

Senior Advantage

NEWS AND EVENTS

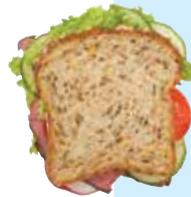
HOW TO DETERMINE IF YOU HAVE HEART FAILURE

Heart failure can be caused by many conditions that damage the heart muscle, including coronary artery disease, heart attack, cardiomyopathy (heart muscle disease), high blood pressure, valve disease, thyroid disease, diabetes and congenital heart defects. Your cardiologist can determine if you have heart failure by the results of an echocardiogram or a cardiac catheterization.

LIVING A QUALITY LIFE

While medication can certainly help with symptoms, Dr. Marshall says patients play a very important role in maintaining their health. "They need to monitor their weight and blood pressure every day, take medications as prescribed, reduce salt intake to less than 1,500 mg./day, limit liquid intake to 8 cups/day, exercise daily, and see their doctor regularly," he says. "Your doctor may also prescribe cardiac rehab, where you will learn and practice strategies for living well with heart failure."

Sue Zanne educates people what they can do for themselves to improve their situation and live a better life. "You really need to monitor the amount of salt and chemicals in food, and even with following recipes. We teach people how to add natural flavors, such as onions and garlic, and other natural seasonings without added salt," she says. "Processed foods have far too much salt, so we encourage patients to choose clean, whole food and fresh fruits and vegetables. The real solution is to make lifestyle changes, one step at a time." ■



Lunch & Learn Seminar

Third Friday of every month, TMC Conf. Rooms 1 & 2

June 16, 11:30 a.m.

Alzheimer's: Causes, Symptoms and Treatments
Vanessa Ohnes, MD, Geriatrician

Reserve your spot today. Call Direct Doctors Plus® at 903.416.DOCS (3627) or register online at www.texomamedicalcenter.net/lunchandlearn.

Game Day

Have fun, sharpen your mind and meet new friends at Game Day.

Now being held the first and third Tuesday of every month!

TMC Cafe, 2 p.m. - Refreshments provided.



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Downtown Denison
619 W. Main Street

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30% OFF SCRUBS EVERY DAY
at the Downtown Denison location.

Bring in this coupon and purchase two scrub items and you'll receive
50% OFF.

One coupon per customer.

For more information on TMC's comprehensive heart program, visit www.texomamedicalcenter.net/cardio.

When to consider surgery for KNEE PAIN



If you have rheumatoid arthritis, osteoarthritis or chronic pain in

your knees, you may have thought about knee replacement surgery. And while surgery can be one way to go, it's always best to try conservative treatments first. TexomaCare Orthopedic Surgeon **Charles Whittenburg, DO**, answers questions about determining the right choice for you.

Q. Where do I start with treatment?

Depending on the cause of your knee pain, and if over-the-counter medications have not worked, your doctor may suggest that you make some lifestyle modifications or refer you for physical therapy, which can help strengthen the muscles that support the knee. Corticosteroid injections may also relieve pain and inflammation, and can last for several months. Minimally invasive arthroscopic surgery could also be an option.

Q. What is the difference between full and partial knee replacement?

If the damage to your knee is limited to a particular area, such as the medial or lateral compartment, a partial knee replacement might be an option. Recovery is much quicker because it is minimally invasive, and less healthy bone and tissue is removed. Patients tend to be up and moving around and back to normal activities sooner, as well, because the incision is not as large.

Q. How do I know if I need a knee replacement?

There are several factors to consider in deciding on this procedure. If conservative treatment has failed, your orthopedic surgeon can evaluate your levels of function and pain, medical history and imaging results. If you have difficulty with everyday activities such as walking, getting up and down from a chair or climbing stairs, your doctor may recommend a knee replacement. It's also helpful to get a second opinion.

Q. What happens if I do need knee replacement surgery?

If surgery is your best option, ask what to expect before and after your procedure. You will want to be as healthy as possible before surgery to help aid in your recovery. Texoma Medical Center has Joint Replacement Camps to help you physically, mentally and emotionally prepare for your surgery. Your doctor may refer you for physical therapy, which can help you get back to routine activities much sooner following your knee replacement. ■

To learn more about TMC's Joint Replacement Camps, call 903.416.4676 or visit www.texomamedicalcenter.net/jointcamp.

Please join us in welcoming these new physicians!



TexomaCare Orthopedic Surgeon **CHARLES WHITTENBURG, DO**, has joined TexomaCare. Dr. Whittenburg graduated from The University of North Texas Health Science Center College of Medicine in Fort Worth, Texas. He did an internship at Tulsa Regional Medical Center in Tulsa, Oklahoma and completed his residency requirements in Orthopedic Surgery at Midwestern University/Chicago College of Osteopathic Medicine in Chicago, Illinois.



ANILKUMAR PATEL, MD, is a Hospitalist at Texoma Medical Center. Dr. Patel graduated from Baroda Medical College in India and completed his Internal Medicine residency requirements at Mount Sinai School of Medicine/St. Joseph's Regional Medical Center in Paterson, New Jersey. He is certified by the American Board of Internal Medicine.



Ear, Nose, and Throat Specialist **MCDONALD ARNOT, DO**, graduated from The University of North Texas Health Science Center College of Medicine in Fort Worth, Texas. He did an internship at McLaren Oakland Hospital in Pontiac, Michigan and completed his residency requirements in Otolaryngology and Facial Plastic Surgery at Michigan State University College of Osteopathic Medicine/McLaren Oakland Hospital. Dr. Arnot is a member of the American Academy of Otolaryngology, American Osteopathic Colleges of Ophthalmology and Otolaryngology, American Osteopathic Association and the Texas Osteopathic Association.

Free Hands-Only™ CPR classes for 2017

The Hands-Only CPR technique, which does not include mouth-to-mouth breaths, is recommended if someone suddenly collapses in an "out-of-hospital" setting. During the Hands-Only-CPR class at Texoma Medical Center, instructors teach the proper technique and also provide information on early heart attack care.

June 1, September 7
TMC Conference Room 2
6 p.m.

Call 903.416.DOCS (3627) or go to www.texomamedicalcenter.net/CPR to register.



Congestive Heart Failure Seminars

Join us for an educational seminar and learn ways to manage your condition. Friends and family are welcome to attend. A heart healthy snack will be provided.

TMC Conference Room 2 • 9-10 a.m.

July 14, 2017

Congestive Heart Failure

Winston Marshall, MD,
 Cardiologist, Texoma
 Cardiovascular Care Associates

October 13, 2017

Diabetes and CHF

Mary Utley, RN, and
 Roylyn Selvy, RD, LD,
 TMC Diabetes LifeCenter

January 12, 2018

**Planning Ahead for
 People With Advanced
 Heart Failure**

Laura McMeley, RN



To reserve your place, call **Direct Doctors Plus®** at **903.416.DOCS (3627)**, or register online at **www.texomamedicalcenter.net/heartseminar**



We're Growing

The Region's Most Experienced Level III Trauma Center

During this time of growth, a temporary emergency entrance and parking lot has been created on the East side of the hospital, located off Pool Road. We will continue to provide quality emergency care in our existing emergency department while work is underway. Thank you for your patience during this period of growth. Look for completion of our expanded emergency department and new patient tower in early 2018!

The Expanded Emergency Department will add:

- 24 New Patient Beds
- 16-Bed Chest Pain Unit
- Dedicated Imaging Suites

RECOGNITIONS & ACCREDITATIONS



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