

# Health

Baylor Health Care System is now  
a part of Baylor Scott & White Health

“Looking back, I can see those signs of stroke that I didn’t pay attention to.”

**Judy Buck**

wants people to be more vigilant about seeing a doctor  
PAGE 6



**TIRED OF BELLY TROUBLES?**  
Learn about common digestive maladies  
and how to feel better PAGE 8

## Lung Cancer Screening Saves Lives

Lung cancer is the leading cause of cancer death in the U.S. And while many types of tests can be used to detect lung cancer, only low-dose spiral computed tomography (LDCT) scans have been shown to ultimately decrease the risk of death from lung cancer in heavy smokers.

If you're an adult ages 55 to 80 with a 30 pack-year smoking history (calculated by multiplying the number of packs per day by the number of years you have smoked) and currently smoke or have quit within the past 15 years, the U.S. Preventive Services Task Force now recommends an annual lung cancer screening with LDCT.

Baylor Scott & White Medical Center – Carrollton offers this screening for a \$150 fee, which is billed to your insurance (does not include radiologist's interpretation). This simple, noninvasive test takes less than 5 minutes to complete and is often covered by Medicare. Talk to your doctor to find out whether screening is right for you.

### MORE

#### Need More Info?

To learn more about the lung cancer screening program at Baylor Scott & White – Carrollton, call **1.800.4BAYLOR** or visit [BaylorHealth.com/CarrolltonCancer](http://BaylorHealth.com/CarrolltonCancer) today.



## Keep Your Skin Safe This Summer

Summer days are finally here, and that means outdoor activities and afternoons spent poolside. It also means our skin is exposed to the sun's dangerous ultraviolet rays, which can cause skin cell mutations that can lead to skin cancer.

"Melanoma is the most dangerous type of skin cancer, causing nearly 10,000 deaths in 2014 alone," explains Fernando Davalos, MD, a family medicine physician on the medical staff at Baylor Scott & White Medical Center – Carrollton.

To protect your skin, Dr. Davalos recommends following the American Cancer Society's "Slip, Slop, Slap and Wrap" recommendation. "Slip on a shirt, slop on some sunscreen, slap on a hat and wrap on sunglasses," he says. "These are especially important between the hours of 10 a.m. and 4 p.m."

In addition to protecting your skin from the sun, Dr. Davalos says it's important to keep a close eye on changes in moles that could indicate cancer and

### GET YOUR SKIN SCREENED

See something that concerns you? For a referral to a dermatologist on the medical staff at Baylor Scott & White – Carrollton, call **1.800.4BAYLOR** or visit [FindDrRight.com](http://FindDrRight.com) today.

report them to your doctor. Remember the ABCDEs of skin cancer when evaluating moles:

- Asymmetry.** When both sides don't match.
- Borders.** Irregular borders.
- Color.** Multiple colors or changing color.
- Diameter.** Larger than a pencil eraser.
- Evolving.** Changes in size, shape, color or texture, as well as bleeding or itching.

Baylor Scott & White Medical Center – Carrollton, 4343 N. Josey Lane, Carrollton, TX 75010. 972.492.1010. Visit [BaylorHealth.com](http://BaylorHealth.com) or call 1.800.4BAYLOR (1.800.422.9567) for information about Baylor Scott & White Medical Center – Carrollton services, upcoming events, physician referrals, career opportunities and more.

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## HOW HEALTHY ARE YOU?

If you haven't had a checkup in a while, it can be hard to know where you fall on the health spectrum. Thankfully, there's an easy way to get a gauge—without leaving home.



Baylor Scott & White Health offers numerous online health risk assessments at [BaylorHealth.com/RiskAssessments](http://BaylorHealth.com/RiskAssessments) that allow you to estimate your risk for everything from acid reflux to osteoporosis.

For each assessment, you'll be asked to answer a handful of questions about your age, weight and lifestyle habits. In a matter of seconds, you'll receive your results and information about what steps to take next, including visiting your doctor. It's that quick and easy.

### MORE

#### Check Your Risk with a Click

Visit [BaylorHealth.com/RiskAssessments](http://BaylorHealth.com/RiskAssessments) to find out your risk level for a variety of conditions such as cancer, diabetes and depression.

# Baby Can Wait

When it comes to pregnancy, every week matters to your baby's health. That means week 37 is just as important as weeks 39 and 40. Acknowledging this, the American Congress of Obstetricians and Gynecologists recommends against induced labor before 39 weeks, except when medically necessary (such as when your water breaks or a complication like preeclampsia develops). Previously, it was thought that babies born anytime between 37 to 42 weeks had the same health results, but recent research shows that's not the case.

Need more persuading? Here are two very good reasons to wait until at least 39 weeks to give birth:

**1 You'll give the baby time to develop.** In the last few weeks of gestation, the baby's lungs and brain are still maturing. Waiting gives these crucial organs time to fully form.

**2 The chances of having a healthy baby go up.** Research shows that the magic window (now considered full term) is 39 weeks 0 days to 40 weeks 6 days. Babies born within this time frame had the best results.



### GET READY FOR THE ARRIVAL

Sign up for classes on childbirth and breastfeeding or take a maternity tour. Visit [BaylorScottandWhite.com/ParentEd](http://BaylorScottandWhite.com/ParentEd) for locations and times near you.



**20%** Women can lose 20 percent of their bone density in the five to seven years after menopause. In honor of National Osteoporosis Month (May), **protect your bones by committing to an exercise regimen.**

Weight-bearing activities are best (think: walking, dancing, doing yoga). Also, stop smoking—tobacco use lowers estrogen levels and weakens your bones.



# Strains vs. Sprains

Learn the difference between these injuries, how to treat them at home and when to see a doctor



**THOUGH THE TERMS “STRAIN” AND “SPRAIN”** are often used interchangeably (and incorrectly), they’re actually two very different injuries. We asked Duncan McKellar, MD, an orthopedic surgeon on the medical staff at Baylor Scott & White Medical Center – Carrollton, to explain these commonly confused injuries, how they happen and how to care for them.

## A CLOSER LOOK AT STRAINS

**What it is:** A strain is a stretch or minor tear in the ligaments, the tough bands of tissue that connect two bones together at a joint.

**How it happens:** Strains are typically caused by twisting injuries and occur most often in the knee, ankle, hip, elbow, shoulder or wrist.

**Who’s at risk:** “Sprains are especially common in athletes who play sports that involve deceleration activities, where an individual is moving quickly and then plants the foot to stop quickly or change

direction,” Dr. McKellar explains. “Sprains in the knee and ankle are common in football, baseball, basketball and soccer, while elbow, shoulder and wrist injuries are seen in sports that involve throwing, like football and baseball.”

## A CLOSER LOOK AT STRAINS

**What it is:** A strain is a stretch or minor tear in the muscle or tendon, the tough bands of tissue that connect muscles to bones.

**How it happens:** Strains typically happen when too much stress is exerted on the muscle during explosive movement. They commonly occur in the Achilles tendon, quadriceps, hamstring or calf.

**Who’s at risk:** “We see strains most often in athletes who play sports that require explosive movements,” Dr. McKellar says. “For example, a runner exploding out of the gate or a lineman exploding out of a stance into a play, or a weightlifter doing a power move with too much weight.”

## UNIQUE INJURIES, COMMON TREATMENTS

While the injuries themselves are unique, their treatments are fairly

similar. “For both sprains and strains, we recommend the RICE (rest, ice, compression and elevation) technique for the first 48 hours,” Dr. McKellar says. “That’s usually when the swelling and pain will begin to subside, and should continue to improve over the next few days.”

However, if swelling and pain persist for five to seven days, or are accompanied by an inability to bear weight (sprains) or bend or straighten out the joint (strains), see your doctor. “This could be an indication of a more severe injury that may require physical therapy, immobilization, a delayed return to activity or surgery to heal properly.”

**MORE**

## Get Back Out There

Has an athletic injury sidelined you? For a referral to a sports medicine physician on the medical staff at Baylor Scott & White – Carrollton, call **1.800.4BAYLOR** or visit [FindDrRight.com](https://www.finddr.com) today.

# Life After Cancer

You beat the disease. Yes! Here are four tips for being a survivor

**→ FAR TOO LONG**, cancer ruled your life. All your energy, all your brainpower—all your *you*—have been focused on treatment, appointments, side effects and cell counts. But now you're cancer-free! As much as you want to revel in the joys of survivorship, you realize this part of the journey can be difficult in its own way. Here are four bits of advice as you begin to adjust.

**1 Own your emotions.** You just got the best news of your life, and yet you feel uneasy. That's OK. "It's normal to be anxious when you're in remission," says Mark Holguin, MD, medical director of the oncology service line for Baylor Scott & White Health – Central Division. "There often is great concern about the cancer coming back and how you'll know if it does."

Don't hesitate to call your doctor to ask about what's normal and what's not, even if it turns out to be a simple ache or a seasonal cough. And talk to someone about how you're feeling. Join a support group or confide in a fellow survivor who can understand where you've been.

**2 Take care of yourself.** Eat a plant-based diet that's rich in antioxidants and fiber, and choose

lean meats and low-fat dairy products. Find a physical activity you enjoy, such as swimming, biking, walking or yoga. Proper self-care will help you feel good and also may boost your recovery from lingering side effects of treatment.

"And there's a growing body of evidence that suggests regular physical activity may be associated with a reduced risk of recurrence," says Dr. Holguin, who recommends getting at least 30 minutes per day three to five days a week.

**3 Keep up with follow-ups.** "Most of the cancers we treat have at least some risk of recurrence," Dr. Holguin says. "Remission is the first step to cure, but we have to maintain that remission long enough to be sure it's not going to come back. It's wise for people to be vigilant about follow-ups so that we may catch recurrences early."

**4 Enjoy life.** You might discover that you have a lot more time on your hands now that you're not going to so many appointments. Use your freer schedule to do all the things you dreamed about during treatment. Or maybe you realize that what was important to you before the diagnosis has changed now. In either case, pursuing enjoyable outlets can be life-affirming.

## HOPE HAS A NEW HOME

Baylor Scott & White – Carrollton offers comprehensive resources for individuals facing a cancer diagnosis as well as breast cancer support groups for patients, survivors and their families. To learn more, visit [BaylorHealth.com/CarrolltonCancer](http://BaylorHealth.com/CarrolltonCancer) today.

Use your free time to do all the things you dreamed about.



Judy Buck and  
her husband, Billy

# Mind the Warning Signs

**Stroke symptoms can begin long before a life-threatening brain attack occurs. Are you paying attention?**

➔ IT WAS A NORMAL SATURDAY in August 2013. Judy Buck was in her kitchen making a grocery list. Then, her left side “felt like it weighed 500 pounds,” she recalls. “I kept writing, and it kept getting heavier and heavier.” She called for her husband, Billy.

“Something’s not right,” she told him. He agreed and suggested going to the hospital. Buck, now 66, wasn’t so sure.

“But then, my face started drooping,” she says. “And I thought, well, maybe I will go and get checked out.”

When they got to Baylor Scott & White Medical Center – Irving, the staff recognized the paralysis on her left side and her drooping face as two symptoms of a stroke—a life-threatening medical condition.

“I never thought it could be a stroke,” Buck says. But now, with more knowledge about these brain attacks, she realizes the earliest symptoms may have started a couple of weeks before.

“If I had to do it over again, I’d have gone to the doctor two weeks before my stroke.”

—Judy Buck

## SYMPTOMS

In addition to a drooping face and weakness on one side of the body, stroke symptoms can include difficulty speaking or understanding, loss of balance, difficulty walking and trouble seeing. The sudden onset of an explosive headache also can be a sign, says Dion Graybeal, MD, medical director for stroke for Baylor Scott & White Health – North Texas.

When these symptoms come and go within a few minutes, it could be a transient ischemic attack, or TIA. Combined with other stroke risk factors, a TIA is correlated with a much higher risk of stroke. “It could happen in the next two days, the next week or even the next month,” Dr. Graybeal says.

Buck realizes the curious symptoms she experienced in the days leading up to her stroke were likely TIAs, or ministrokes.

“I did have a little bit of numbness on my left side. I thought it was just because I sat at the computer too long. And I had horrible headaches,” she says. “Looking back, I can see those signs of stroke that I didn’t pay attention to.”

If you’re having stroke symptoms that persist, call 911. If your symptoms are fleeting, it’s still important to see a doctor immediately.

## TREATMENT

There are two main types of stroke. During an ischemic stroke (about 85 percent of strokes), a blood clot blocks blood flow to the brain. In a less-common hemorrhagic stroke, there’s bleeding in the brain.

Once a stroke has started, the treatments are time sensitive, Dr. Graybeal says. An IV medication called tPA, a “clot-busting” drug,

ideally should be given within three hours of the start of symptoms. This treatment saved Buck’s life.

Other treatments have different time limits, but it’s all a matter of hours. Getting care quickly helps prevent death and disability.

“You’re losing about 2 million brain cells per minute. Time really is brain,” Dr. Graybeal says. “If we can restore normal blood flow quickly, we can improve functional outcomes.”

## PREVENTION

Though there are some risk factors you can’t change (like age and family history), there are a few you do have control over. To reduce your risk, it’s important to not smoke and to effectively manage high blood pressure, diabetes, cholesterol and atrial fibrillation. Keeping these conditions in check may include taking medication as well as exercising, eating healthfully and managing stress.

It’s also important to talk to your primary care physician about regular screenings for blood pressure, diabetes and cholesterol to better understand your risk.

Buck says she sees areas of her life she could’ve improved upon: She worked a lot, remained sedentary for long periods and had a lot of stress.

Today, she stresses less, eats healthier and exercises more, and she’s lost weight.

And although she was always reluctant to go to the doctor for her checkups, she now sees the value—and hopes others do, too.

“It’s so important that people take better care of themselves,” she says. “And take time and listen to what your body is trying to tell you.”

## MAKING HUGE STRIDES IN STROKE CARE

Recent advances in prevention and treatment are helping reduce the risk of stroke and improve patient outcomes. We asked Nnamdi Dike, DO, a neurologist on the medical staff at Baylor Scott & White Medical Center – Carrollton, to share some of the most compelling new advancements, treatments and technologies that have come about in the past five years.

**The evolution of dedicated stroke centers.** “We now have a wealth of hospitals that are certified by The Joint Commission as Comprehensive Stroke Centers and Primary Stroke Centers,” Dr. Dike says. “This means they have met and exceeded national standards and adhere to guidelines that are proven to improve outcomes for stroke patients.”

**Better stroke prevention drugs.** “One of the biggest advances in stroke prevention is the introduction of new and better anticoagulation drugs, which can help prevent stroke in individuals with atrial fibrillation,” Dr. Dike says. “These drugs are exceptionally effective at lowering the risk of an embolic stroke.”

**Improved surgical treatment for acute stroke.** “For individuals with large clot blockages in the arteries leading to the brain, new surgical devices like the retrievable stent can be used to open up the artery and remove the clot, essentially stopping a stroke in its tracks,” Dr. Dike says.

MORE

### Your Best Defense

Your primary care physician can help you identify your personal risk factors for stroke. For a referral to a provider on the medical staff at Baylor Scott & White – Carrollton, call **1.800.4BAYLOR** or visit **[FindDrRight.com](https://www.baylorhealth.com/Carrollton)** today.



Women are twice as likely as men to get irritable bowel syndrome.

# Keeping Tract

Your guide to understanding the GI troublemakers IBS and IBD

## → IRRITABLE BOWEL SYNDROME and

inflammatory bowel disease may sound similar—they even share some symptoms—but they are actually very different. Understanding the distinctions between the two gastrointestinal conditions can help you get the relief you need.

### WHAT IS IBS?

Irritable bowel syndrome (IBS) occurs when the gastrointestinal

tract acts abnormally, causing symptoms such as constipation, diarrhea or alternating bouts of each. It affects around 10 to 15 percent of people in the U.S., according to the International Foundation for Functional Gastrointestinal Disorders, and is often diagnosed in late adolescence or early adulthood.

“IBS is quite common,” says Jason Welch, DO, a gastroenterologist on the medical staff at Baylor Scott & White Medical Center – Marble Falls. “Though many theories exist, there is not a single, identifiable cause, unfortunately, as there is

no anatomic disease or bowel inflammation. What we can do is treat the symptoms.”

### WHAT IS IBD?

Inflammatory bowel disease (IBD) refers to two conditions that cause inflammation or ulceration along the gastrointestinal tract: Crohn’s disease and ulcerative colitis. Altogether, these conditions affect about 1.6 million Americans, according to the Crohn’s & Colitis Foundation of America.

“IBD carries significant long-term health implications and should be closely managed by a gastroenterologist,” Dr. Welch says.

## IBS and IBD: Comparing the Conditions

	Irritable Bowel Syndrome	Inflammatory Bowel Disease
<b>Most often affects</b>	Women are twice as likely as men to get it, according to the National Institute of Diabetes and Digestive and Kidney Diseases, and it's most common in those 45 and younger.	Men and women. Ulcerative colitis: people ages 15 to 30 and older than 60, people of Jewish descent and those who have a family member with the disease. Crohn's disease: people ages 15 to 35 and those who have a family member with the disease.
<b>Symptoms</b>	Abdominal pain and discomfort; a change in bowel habits; constipation, diarrhea or both; urgent need for a bowel movement; bloating; mucus in the stool; feeling as though bowel movements are incomplete.	Abdominal cramps and pain; constipation; diarrhea; rectal bleeding; urgent need for a bowel movement; feeling as though bowel movements are incomplete; weight loss; loss of appetite; fever; fatigue; night sweats.
<b>Treatment</b>	Primary: lifestyle changes, including dietary changes and stress management. Secondary: medication, probiotic supplements, counseling and alternative medicine like acupuncture, meditation and yoga. See your doctor regularly to get symptoms under control.	Medication, including anti-inflammatories, immunosuppressants, antibiotics, pain relievers and other prescriptions and supplements. Surgery may be necessary in some cases.
<b>Raises risk for colon cancer</b>	No. Because it's classified as a syndrome (a collection of symptoms) rather than a disease, IBS itself does not cause cancer.	Yes, depending on duration and severity. "Once a person has had IBD for 10 to 15 years, he or she will need surveillance colonoscopies every one to two years, even if the disease is under control by then," says Jason Welch, DO, an internal medicine physician and a gastroenterologist.

## What Is a Gastroenterologist?

If you experience digestive health issues, you may be referred to a gastroenterologist.

These specialists are internal medicine physicians who have completed additional years of education and training in treating issues of the digestive system, which includes the esophagus, stomach, liver, intestines, gallbladder and pancreas.

Some of the reasons you may be referred to a gastroenterologist include:

- ▶ Abdominal pain
- ▶ Anemia
- ▶ Constipation or diarrhea
- ▶ Heartburn
- ▶ Liver, gallbladder or pancreas problems
- ▶ Nutritional problems
- ▶ Trouble swallowing
- ▶ Unexplained weight loss

One of the main reasons people see a gastroenterologist is to be screened for colorectal cancer. "Colorectal cancer is the second-leading cause of cancer death in the U.S., but it can be prevented through proper colonoscopy screening, which can both detect and remove precancerous polyps," explains Suvin Banker, DO, a gastroenterologist on the medical staff at Baylor Scott & White Medical Center – Carrollton.

Though most people dread the idea of the procedure, Dr. Banker says most patients report a smooth overall experience. "Medication is administered to make you completely comfortable or asleep," he says. "Most patients don't even realize they've had the procedure—and in the end it could save your life."

**MORE**

### Don't Suffer in Silence

If you think that you may have IBS or IBD, talk to your doctor. For a referral to a gastroenterologist on the medical staff at Baylor Scott & White – Carrollton, call **1.800.4BAYLOR** or visit **FindDrRight.com** today.



# Windows to Your Health

By examining blood vessels in the eye, a research team looks to avoid vision loss in people with diabetes and other conditions

THE EYES HAVE BEEN CALLED windows to the soul. But they are also windows to your health.

That's because by examining blood vessels in the eye, doctors can detect health conditions like diabetes.

Knowing how these blood vessels work normally and under duress is important in helping develop treatments—and that's the goal of the Ophthalmic Vascular Research Program (OVRP), a collaboration between the Department of Ophthalmology

at Baylor Scott & White Health and the departments of Medical Physiology and Surgery at the Texas A&M Health Science Center (TAMHSC).

## A UNIQUE TECHNIQUE

The key is to study blood vessels in the eyes independently from other tissues. Lih Kuo, PhD, director of the research program and professor of medical physiology at TAMHSC, is known for his work with isolating microscopic blood vessels from the heart. The OVRP team applied a similar approach to the eye.

“Blood vessels in the heart respond to stimuli in a certain way,” explains Robert Rosa Jr., MD, an ophthalmologist, vice chair for research in the Baylor Scott & White Department of Ophthalmology and a researcher in the OVRP. “The blood vessels in the kidneys may respond differently to the same stimuli; the blood vessels in the eye may respond in yet another way.”

Today, the OVRP is the only research program in the U.S. to use the isolated retinal microvessel technique.

## LASTING IMPACT

Diseases like diabetes and high blood pressure affect blood vessels in the eye, damaging the retina (the back of the eye) and leading to impaired vision. Regulating and improving blood flow might help.

“Diabetes is the most common cause of blindness among 20- to 60-year-olds,” Dr. Rosa explains. “Our work could have a significant impact in preserving vision in patients with diabetes.”

What's more, the OVRP investigators have developed patents that could aid in the establishment of new treatments for other eye diseases, including dry macular degeneration and retinitis pigmentosa.

“Our goal ultimately,” he says, “is to have a lasting impact on patient care and find new therapeutic strategies to prevent blindness from retinal vascular and degenerative diseases.”

## ABOUT THE STUDY

### Ophthalmic Vascular Research

A team of scientists is better understanding how the blood vessels in the eye work with the goal of finding therapies for people with impaired vision as a result of retinal vascular and degenerative diseases.

### Key Contributors

Baylor Scott & White Health

Texas A&M Health Science Center

Scott & White Healthcare Foundation (funding)

Retina Research Foundation (funding)

National Institutes of Health (funding)

MORE

Take a Look at the Latest Research

Visit [BaylorHealth.com/AdvancingMedicine](http://BaylorHealth.com/AdvancingMedicine) and [research.sw.org](http://research.sw.org) for other advancements like this.

# WHAT'S ONLINE

→ [BaylorHealth.com](https://www.BaylorHealth.com)



## TIPSHEET

### HEART-HEALTHY GROCERY LIST

When you go shopping, are you filling your cart with foods that are good for your ticker—or your tummy? With a little planning, you can do both!

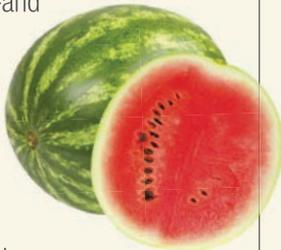


→ Go to [BaylorHealth.com/Tipsheet](https://www.BaylorHealth.com/Tipsheet) to download our handy checklist.

## RECIPE

### WATERMELON YOGURT SOUP

This cold soup features a refreshing—and hydrating—blend of watermelon, cucumber and yogurt that's well suited for warmer weather.



→ Visit [BaylorHealth.com/Recipe](https://www.BaylorHealth.com/Recipe) to find this recipe, plus many more.



## ONLINE

### Beautiful Babies Born Here

→ To learn more about our maternity tours, parent education classes, NICU and more, call **1.800.4BAYLOR** or visit [BaylorHealth.com/CarrolltonBabies](https://www.BaylorHealth.com/CarrolltonBabies) today.

## VIDEO

### FOUR MEDICATION SAFETY TIPS

Adverse drug reactions account for hundreds of thousands of visits to hospitals and emergency departments every year. Learn the dos and don'ts of your daily prescription dose.

→ Watch the video at [BaylorHealth.com/DigitalShort](https://www.BaylorHealth.com/DigitalShort)—and share the advice.



## QUIZ

### HAVE YOU MADE YOUR HEALTH CARE WISHES KNOWN?

See what you know about advance directives—such as living wills—which are important documents that tell loved ones about your care in the event that you are unable to speak for yourself.

→ Check out [BaylorHealth.com/AdvanceDirectiveQuiz](https://www.BaylorHealth.com/AdvanceDirectiveQuiz) to test your knowledge.

# Community Calendar

## May & June 2016

Registration required for all events unless otherwise indicated. → Call **1.800.4BAYLOR** to register.

### HEALTH SCREENINGS

#### Screening Mammograms

Recommended for women 40 and older, screening mammograms do not require a physician's order.

→ Go to [BaylorHealth.com/CarrolltonBreastImaging](http://BaylorHealth.com/CarrolltonBreastImaging) or call **972.394.1080** to schedule. Saturday appointments are available. Most insurance plans are accepted.

### SEMINARS AND SUPPORT GROUPS

**Breast Cancer Support Group** March 1, 6:30 to 8 p.m., Conference Room 1. No charge.

**Ostomy Support Group** First Tuesday of each month, 6 to 7:30 p.m., 1st floor, Conference Room 1

**Weight Loss Surgery Support Group** Third Thursday of each month, 6 to 7:30 p.m., 3rd floor, Classroom 300.

### WOMEN'S AND CHILDREN'S EDUCATION

#### Childbirth

**Two-week series:** May 15 and 22, 2 to 5 p.m. No charge.

**Hybrid series:** Combination of a guided home e-learning session and a 3-hour in class session. June 4, 9 to noon. \$30.

**Online class:** Self-paced Web-based course. \$30.

#### Newborn Care

May 2 or June 6, 6 to 9 p.m. \$30.

#### Breastfeeding

May 19 or June 23, 6:30 to 9:30 p.m.

No charge.

Online class: Self-paced Web-based course. No charge.

#### Childbirth/Breastfeeding

Four-week series: April 28, May 19, June 2 and June 23, 2 to 5 p.m. No charge.

#### Infant and Child CPR

May 7 or June 4, 1 to 4 p.m. \$30 per couple, \$15 for each additional participant.

#### Safe Sitter™

Not a certification course. June 8, 9:30 a.m. to 4:30 p.m. \$50.



# GEAR UP FOR BETTER HEALTH

**SATURDAY, JUNE 11 · 7:30-11:30 A.M.**

**Baylor Scott & White Medical Center – Carrollton**  
Main Entrance-4343 N. Josey Lane, Carrollton

Regular checkups should be a part of every man's routine. Fortunately, our **FREE** men's health event makes it simple to tune up your health. Attend It's a Guy Thing® for free health screenings and information all in one place.

#### This event includes:

- Free Health Screenings:
  - lipid panel,\* blood pressure, body fat analysis, waist circumference & more!
- Men's health education seminars. Topics include:
  - Primary care
  - Cardiology
  - Urology
  - Gastroenterology
  - Orthopedics
- Wellness booths
- Complimentary breakfast
- 5-minute chair massage
- Grilling tips and recipes

IT'S A  
**GUY**  
THING

**TO REGISTER:**  
Call **1.800.4BAYLOR**  
or go to  
[BaylorScottandWhite.com/  
GuyThing](http://BaylorScottandWhite.com/GuyThing)

\*For a more accurate reading, do not eat or drink anything after midnight before the screening. You may take your regular medications as directed.



**Baylor Scott & White**

**MEDICAL CENTER**

**CARROLLTON**

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