

Baylor Scott & White

Health

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November 2015

“I had cancer.
I had surgery.
And I haven’t
looked back.”

Ray Jackson

chose a minimally invasive
robotic procedure to remove
his prostate PAGE 6



WHAT WOULD YOU DO?
Take our quiz to test your
emergency readiness PAGE 4





Three Steps to Help Stop GERD Symptoms

Gastroesophageal reflux disease (GERD) is common, but you shouldn't live with the discomfort. Shibu Oommen, MD, a gastroenterologist on the medical staff at Baylor Regional Medical Center at Plano, says these steps can help:

1. Start with lifestyle changes.

Try not to eat within three hours of bedtime, elevate the head of your bed six inches, quit smoking and avoid triggers such as fatty foods, chocolate, peppermint, tomatoes and alcohol.

2. Try medication. For occasional heartburn after a big meal try over-the-counter medications. If you're having

TAKE THE NEXT STEP
For a referral to a gastroenterologist on the Baylor Plano medical staff, visit BaylorHealth.com/Plano or call **1.800.4BAYLOR**.

symptoms several times a week, talk to your doctor about prescription options.

3. Consider surgery. Surgery can eliminate the need for lifelong medication. With a procedure called fundoplication, your doctor can reinforce the area around the bottom of your esophagus.

HOW'S YOUR HIP?

If you're experiencing hip pain it could be caused by hip bursitis, a common condition that can stem from overuse, trauma or tight muscles.

Robert Berry, DO, the medical director of sports medicine at Baylor Regional Medical Center at Plano, explains that the bursa, a fluid-filled sac, overlies the bony part of the hip and acts as a shock absorber. Bursitis results when the bursa becomes inflamed. Distance runners and athletes in collision sports are prone to bursitis.

Bursitis may heal on its own with rest and over-the-counter anti-inflammatory medications. If the pain lasts for more than several weeks, see your doctor. He or she may recommend stronger anti-inflammatories, oral or injected steroids, physical therapy, ultrasound or transcutaneous electrical nerve stimulation (TENS).

In a newer treatment, called platelet rich plasma, doctors draw the patient's blood, spin it to concentrate the platelets, and inject that at the site of the injury. "It's a nondrug way to speed the body's own recovery," Dr. Berry says.

Stretching and using a foam roller can reduce your risk of bursitis.

MORE

Back in the Game

For a referral to a sports medicine specialist on the Baylor Plano medical staff, visit BaylorHealth.com/Plano or call **1.800.4BAYLOR**.

Baylor Regional Medical Center at Plano, 4700 Alliance Blvd., Plano, TX 75093. 469.814.2000. Giving Opportunities/Baylor Health Care System Foundation: 214.820.3136. Baylor Health Care System Mission: Founded as a Christian ministry of healing, Baylor Health Care System exists to serve all people through exemplary health care, education, research and community service. President and CEO, Baylor Health Care System: Joel Allison.

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5,535

That's the number of kidney transplants made possible by living donors in the U.S. last year. **To be considered as a donor for a living kidney transplant**, you need to be age 18 to 65, healthy and a blood-type match with the recipient.



Your Body Wants You to Stop Smoking

Of course you know that smoking is bad for your lungs, but the damage doesn't end there. In fact, hardly an inch of the body escapes unharmed. We take a top-down look at the ill effects.

MORE

It's Quittin' Time

To find the tools and resources you need to quit smoking for good, visit BaylorHealth.com/QuitSmoking today.

EYES

Your chances of getting cataracts increase.

TEETH

Poor dental health, even tooth loss, is a common consequence.

HEART

Your risk of heart disease is two to four times greater than that of a nonsmoker.

LUNGS

It's not just lung cancer. Smoking can also cause emphysema and chronic bronchitis.

MIDSECTION

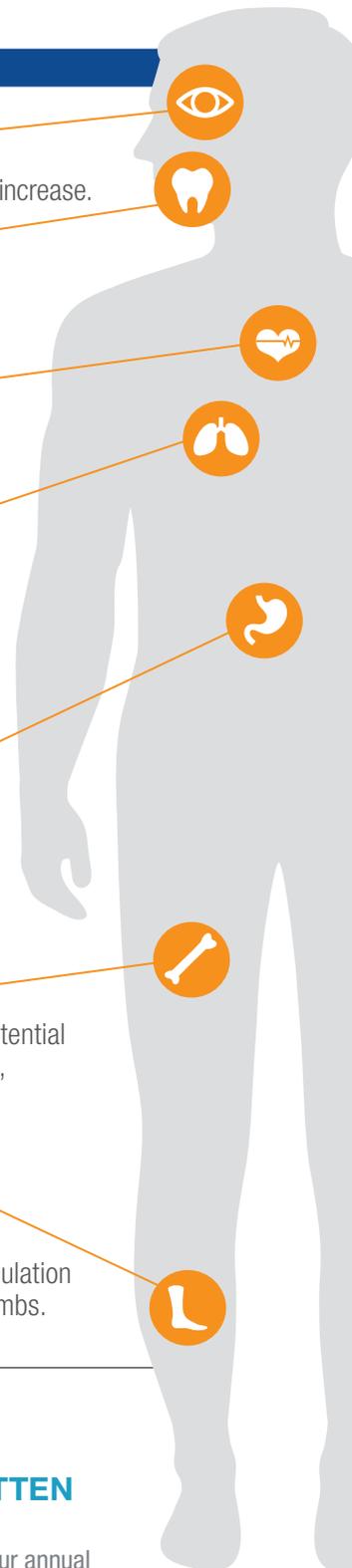
Smoking can lead to cancer in almost any organ, including the stomach, bladder and colon.

BONES

Weaker bones are a potential side effect for smokers, especially women.

FEET/LEGS

Reduced blood flow from smoking contributes to poor circulation in the skin and lower limbs.



Flu Nonfiction

Influenza season is here, just like every year, and yet misconceptions still exist. Here are three flu stories that need to stop.

STORY #1: Flu germs spread by shaking hands, not by sharing books. Spoiler alert! Those nasty bugs can live on hard surfaces (books, doorknobs, computers, kitchen counters) anywhere from two to eight hours. Grab a disinfectant wipe, stat!

STORY #2: I don't have a fever, so I don't have the flu. Wrong. Symptoms vary, and not everyone who has the flu gets a fever. You could have one or all of these signs: chills, cough, sore throat, body aches, congestion, diarrhea and vomiting.

STORY #3: It's too late to get a flu vaccine. No, it's not. Flu season peaks in January and February and can last until May. Now's the time to make your appointment.



MORE

Emergency Care Close to Home

To learn more about the emergency services offered at Baylor Plano visit BaylorHealth.com/PlanoER today.



Emergency IQ

Test your knowledge about urgent medical situations

➔ For most of us, emergencies are (thankfully!) few and far between. But that makes them difficult to prepare for. Find out how well-versed you are in handling the unexpected.

1 True or false: Emergency department staff don't have time to look for "in case of emergency" information before treating a patient.

2 True or false: Chest pain is always an emergency.

3 Which types of allergies are important for medical staff to know about?

- a. Seasonal
- b. Medication
- c. Soap/antiseptic
- d. B and C
- e. All of the above

4 CPR compressions should be hard and fast and to the beat of which iconic disco tune?

- a. "YMCA"
- b. "Stayin' Alive"
- c. "Funkytown"
- d. "Turn the Beat Around"

Answers

1. False. "We wish all people would carry the names and phone numbers of their doctor and an emergency contact, because we look for them," says Elizabeth Fagan, MD, emergency department medical director at Baylor Medical Center at McKinney. "Having that information is really important, especially when a patient is unable to speak for themselves."

2. False. Although chest pain should always be taken seriously, emergency care may not be necessary if it is caused by movement (could be musculoskeletal in nature) or present when breathing deeply (possibly tied to a lung condition). Seek emergency medical attention if chest pain is new or different, or it feels like pressure, tightness or fullness and lasts longer than a few seconds or goes away and comes back, especially with exertion. Other reasons to seek immediate care include shortness of breath, sweating, and discomfort in the neck, shoulders, upper back, jaw or either arm. Women might experience different heart attack symptoms, including fatigue, abdominal pain, nausea or lightheadedness.

3. d. Having your medical history available in an emergency helps medical staff know how to best treat you. But if nothing else, write down and keep with you a list of pertinent allergies. "If we don't know what you're allergic to, we worry when ordering medication, because we don't want to make things worse," Dr. Fagan says. "We need to know about allergies to anything you might encounter in the emergency department—medications, antiseptics or latex."

4. b. CPR compressions should be hard and fast—faster than most people think. If you ever find yourself in a situation where you have to give CPR, just keep in mind the tempo of "Stayin' Alive."



In the Clear

Understanding the lesser-known causes of lung cancer

Even if you've never touched a cigarette in your life, it's important to know there are things besides smoking that increase your chances of getting lung cancer.

"Smoking is definitely the number-one risk factor for lung cancer and plays a role in about 90 percent of lung cancers," says David Mason, MD, chief of thoracic surgery and lung transplantation at Baylor University Medical Center at Dallas and medical director of the Chest Cancer Research and Treatment Center at Baylor Charles A. Sammons Cancer Center at Dallas. "But there are also other important risk factors patients should be aware of."

SECONDHAND SMOKE

A large contributor to lung cancer is being around people who are in the habit of smoking. "Secondhand smoke is almost as damaging to the lungs as firsthand smoke," Dr. Mason says. "It depends on proximity and duration of exposure."

Each year, more than 7,300 lung cancer deaths among nonsmokers in the U.S. are attributed to secondhand smoke, according to the Centers for Disease Control and Prevention. And research suggests that people who are regularly exposed to secondhand smoke at home or at work have a 20 to 30 percent greater chance of having lung cancer than others.

RADON

Exposure to radon presents another, lesser risk of lung cancer but one that deserves attention. According to the American Cancer Society, about 11 percent of the 221,000 lung cancer cases expected to be diagnosed in the U.S. in 2015 will be from radon exposure. Radon is an odorless natural gas that's released from rocks and soil in certain areas and can get trapped in homes and other buildings. The Environmental Protection Agency estimates that one in 15 homes has high radon levels. Call the Texas Department of State Health Services at 800-293-0753 to inquire about radon testing.

OTHER CAUSES

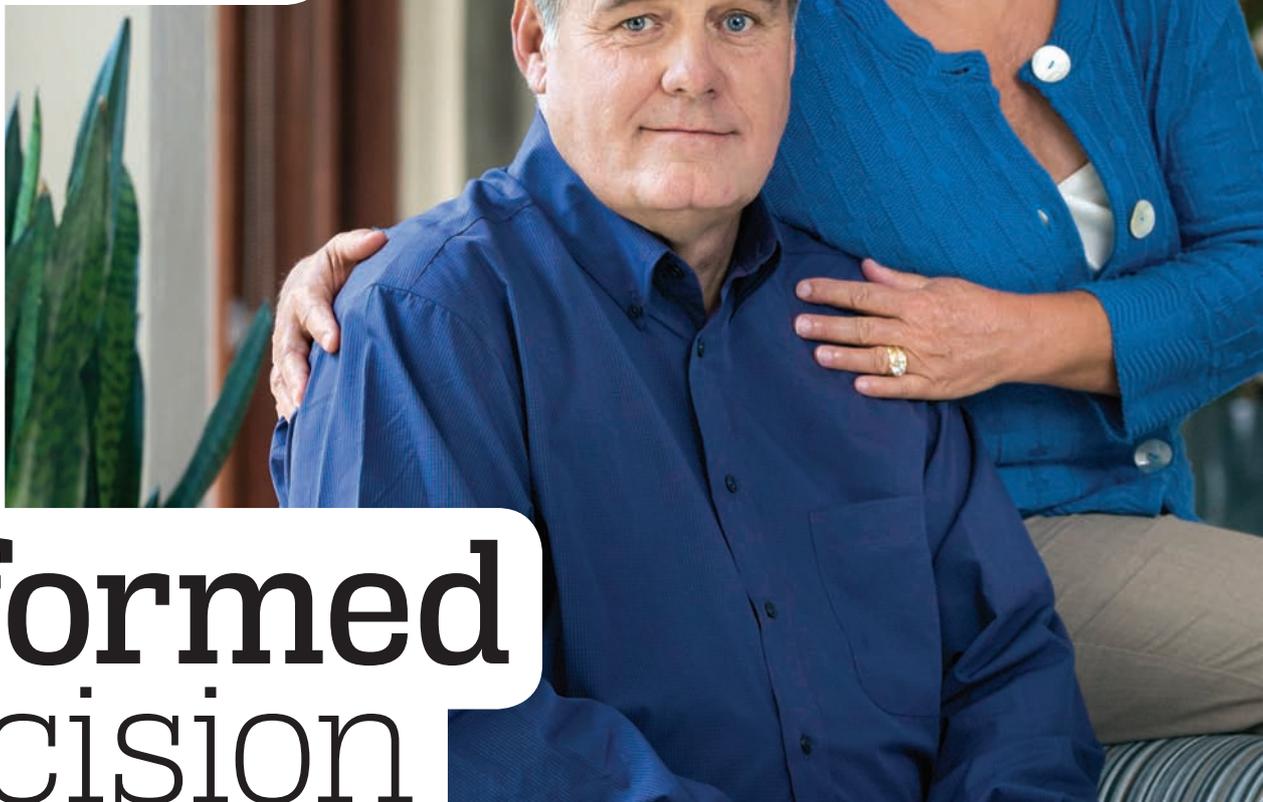
If you are concerned that you've been exposed to asbestos, arsenic or diesel exhaust; have a family or personal history of lung cancer; or previous radiation to the chest, you might want to see a care provider.

"Lung cancer isn't the most prevalent of cancers, but it is one of the most deadly," Dr. Mason says, noting that when it shows symptoms many times it has spread to other parts of the body. "Talk to your doctor about your risk factors and to determine if lung cancer screening is right for you."

WHAT'S YOUR RISK?

If you are at high risk for lung cancer you may be eligible to take advantage of a lung cancer screening program at Baylor Charles A. Sammons Cancer Center at Plano. Call **469.814.4417** to learn more.

“The doctor gave me the peace of mind that everything was going to be OK.” —Ray Jackson



Informed Decision

A prostate cancer diagnosis doesn't have to be devastating, but it does mean educating yourself about treatment options

➔ Ray Jackson admits that when his urologist told him, “You have prostate cancer,” he didn’t hear anything else after that. So the 58-year-old from Greenville, Texas, appreciated being asked to come back in a couple of days to discuss his options.

After learning about the benefits and risks of each treatment, Jackson decided on minimally invasive robotic surgery to remove his prostate. The shorter recovery time, compared with traditional surgery, was appealing. Within a month of his surgery at Baylor University Medical Center at Dallas in late 2012, Jackson was fully recovered

from the procedure—and has remained cancer-free ever since.

“Being diagnosed with prostate cancer isn’t the end of the world,” says W. Scott Webster, MD, chief of urology at Baylor Dallas. “You just need to partner with your doctor to come up with a plan that’s suited to you. There’s not a one-size-fits-all approach.”

The idea of there being a single treatment that’s right for everyone is one of the misconceptions people have about prostate cancer diagnosis and treatment.

Here are a few facts to keep in mind.

MEN USUALLY DON'T NEED A PSA TEST EVERY YEAR.

Screening for prostate cancer begins with a prostate-specific antigen (PSA) blood test and a rectal exam.

"PSA testing is a good tool for screening at-risk populations," Dr. Webster says. "I think select patients who have at least a 10-year life expectancy or a family history of prostate cancer should be screened between the ages of 50 and 65."

Dr. Webster suggests that men get a baseline PSA test around age 50 but says they don't necessarily need a test every year unless they have symptoms such as difficulty urinating, blood in the urine or pain during urination.

Jackson previously had a PSA test, so his doctor noted a change in his PSA

level and ordered a prostate biopsy to confirm the cancer diagnosis.

NOT EVERY CASE OF PROSTATE CANCER REQUIRES IMMEDIATE TREATMENT.

Some prostate cancer is considered low-risk and would spread so slowly that it might never shorten life expectancy. That means doctors don't necessarily need to be aggressive in treating those cancers, and instead they can take a "watchful waiting" or observational approach.

"I tell a lot of men that we don't necessarily have to be really aggressive in treating low-risk prostate cancer," Dr. Webster says. "We just need to keep an eye on it to make sure it doesn't become a high-risk problem."

INCONTINENCE AND IMPOTENCE ARE NOT INEVITABLE AFTER PROSTATE CANCER TREATMENT.

Jackson is proof that these side effects don't happen to everyone. Once his post-surgical catheter was removed, he only needed to wear protective briefs for a few days until he was confident he could control his bladder.

He credits exercises explained to him by the team at Baylor Dallas with regaining function so soon after surgery. "They taught me how to strengthen my pelvic floor muscles, which they said would be weakened by surgery," Jackson says. "They said I'd recover more quickly if I learned how to control them ahead of time, and they were right."

Jackson also started having erections again within about 90 days of surgery. "Everything works great," he says, "just like it did before."

MEN SHOULD CHOOSE THE TREATMENT THAT'S RIGHT FOR THEM.

Although there are some experimental treatments for prostate cancer, Dr. Webster doesn't recommend them. He thinks the five mainstream treatments—observation, surgery, radiation, freezing the prostate with cryotherapy or using hormonal manipulation—give men all the options they need.

"Men should decide if they're comfortable leaving the prostate alone and, if they choose treatment, which potential side effects they're most comfortable with," Dr. Webster says. "Which treatment to choose is an individual decision a man should make in conjunction with his doctor."

THE SCREENINGS NO GUY SHOULD SKIP

With heart disease and cancer being the top two killers of men, screening for them is top priority.

"Blood pressure and cholesterol levels are key indicators of heart disease risk," says Adrian Nguyen, MD, an internal medicine specialist on the medical staff at Baylor Regional Medical Center at Plano.

You should have your **blood pressure** checked every two years unless it's higher than 120/80—then check it every year. Men over 65 should also get it checked annually.

Anyone over age 20 should get a complete **cholesterol** and triglycerides analysis every five years. You may need more frequent checks if your total level is over 200 mg/dL, your "good" HDL cholesterol is less than 40, you're older than 45 or you have other risk factors for heart disease.

Men at average risk for **colon cancer** should have a colonoscopy every 10 years starting at age 50 to look for precancerous growths in the colon.

Talk to your doctor about when to begin screening for prostate cancer with the prostate-specific antigen (PSA) blood test and a digital rectal exam.

MORE

Get Checked

For a referral to a physician on the Baylor Plano medical staff, call **1.800.4BAYLOR** or visit **[BaylorHealth.com/Plano](https://www.baylorhealth.com/Plano)** today.



Avoid these 5 holiday hazards for a more joyful season

Tidings of Health

➔ It seems as though the holidays are less “peace on earth” and more “stretched to the ends of the earth,” which makes it easy for good habits to fall by the wayside. Use this guide to help you navigate the season, healthfully.

1 HOLIDAY HEALTH HAZARD: WEIGHT GAIN

First, the good news: American adults, on average, gain only about a pound during the fall and winter months. The problem is, few of us ever lose it, meaning those pounds add up over time. And adults who are already overweight typically gain more.

“The holidays tend to be challenging for people who are trying to control their weight because there are more opportunities to eat and overeat,” says Jennifer Flory, MD, a family medicine physician at Scott & White Clinic – Westfield.

Dr. Flory suggests planning family get-togethers around activities rather than food. “Push away from the dinner table,” she says. “Go for a walk, go to the park or take the kids ice skating.”

2 HOLIDAY HEALTH HAZARD: THE BUFFET TABLE

No matter how much you avoid food-focused activities, you’ll likely find yourself in the presence of at least one buffet spread. The first thing you should do is ask the host if you can contribute a dish—that way you’ll know there will be at least one healthy option.

Another tip is to eat before you go, so you’re not as tempted to overindulge at the event, Dr. Flory says. But if you are the type of person who would eat before and then eat again

there, this might not be the best solution for you. Instead, try drinking a tall glass of water to fill you up and using a small plate to limit portions.

For those with chronic conditions such as diabetes, don’t let all the festive fare derail your treatment plan. “If you have a health issue, it’s important to follow the diet your doctor has you on throughout the holidays,” Dr. Flory says. “And continue to take your medications as prescribed, too.”

At gatherings, keep portions small.





IS IT SAD?

This time of year, as the days grow shorter and colder and you spend more time indoors, you may find yourself facing seasonal affective disorder (SAD).

Signs of SAD are similar to those of depression: feeling down or depressed most of the day nearly every day, feeling hopeless or worthless, having low energy or increased fatigue, losing interest in activities you once enjoyed, oversleeping or weight gain.

“The thing to remember is any time the season changes it’s normal to have ups and downs,” says Elaine Hess, PhD, a clinical psychologist at Baylor Regional Medical Center at Plano.

“But if you’re having these feelings nearly every day for more than one to two weeks you should see your doctor or a mental health provider.”

Treatment options for SAD include traditional psychotherapy, medication, and light therapy, which mimics outdoor light and is believed to change brain chemicals linked to mood.

MORE

Need Help?

For a referral to a mental health professional at Baylor Plano, visit [BaylorHealth.com/Plano](https://www.baylorhealth.com/plano) or call **1.800.4BAYLOR**.

3 HOLIDAY HEALTH HAZARD: SEASONAL DEPRESSION

If this time of year has you feeling blue, don’t ignore it.

“Holiday depression is still depression. People need to see their doctor for it,” Dr. Flory advises. “Beyond that, try to get out and do things with family and friends so you’re not isolated at home.”

4 HOLIDAY HEALTH HAZARD: TOO MUCH BUBBLY

With a party around every corner, be sure to watch it with the drinks. Even a few weeks of too many toasts can have negative effects on the heart. Alcohol raises blood pressure and the risk for heart failure, according to the American Heart Association. Women should average no more than one drink per day, and men one to two.

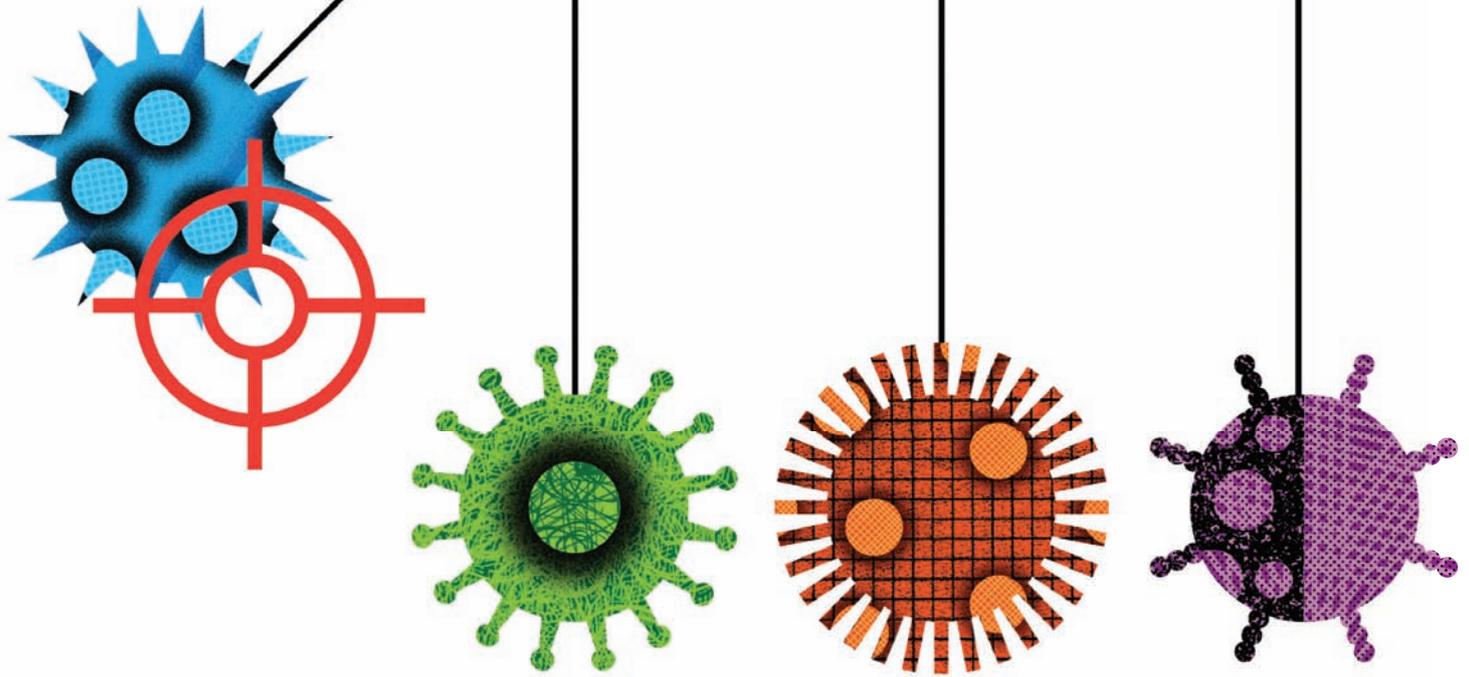
Another reason to cut back on the bubbly? “There’s a large source of calories in alcoholic beverages,” Dr. Flory says. “Have only one cocktail. Otherwise, stick to water or spritzers that don’t have any calories.”



5 HOLIDAY HEALTH HAZARD: EXCESS STRESS

You know it’s coming—party planning, home decorating, gift shopping and other holiday obligations to be squeezed into an already busy lineup. The first step to managing stress is to schedule everything, even your own to-do list, so these extra tasks don’t become burdensome at the end of a long day.

Then, practice saying no. You don’t owe anyone a reason for not being able to attend another gathering or bake another batch of cookies. But if your schedule is full with the activities you’ve added, you can confidently say, “Sorry, I already have a commitment that day.”



Moving Target

Monitoring the effectiveness of this year's seasonal flu vaccine is critical to developing the next one

➔ The seasonal flu vaccine protects millions of Americans a year from influenza, a virus that can lead to hospitalization and even death. Because influenza viruses are constantly evolving, a new vaccine is designed each

year to fight the strains expected to be most common during the upcoming season. The vaccine is the result of a global effort, supported by Baylor Scott & White Health.

HOW THE VACCINE COMES TO BE

The Food and Drug Administration's Vaccines and Related Biological Products Advisory Committee decides which strains will be included in the annual vaccine for the

U.S., relying on recommendations from influenza testing centers all over the world.

Since 2011, Baylor Scott & White Health – Central Division has been one of five U.S. sites that work with the Centers for Disease Control and Prevention to study the effectiveness of the flu vaccine and supply data to the FDA advisory committee. Six Baylor Scott & White clinics in Temple and Belton participate.

“During each flu season, our clinics enroll at least 800 patients ages 6 months and older who may have contracted the flu,” says Manjusha Gaglani, MBBS, section chief of pediatric infectious diseases and principal investigator of the study at Baylor Scott & White. “Then, we collect information about them, such as whether they were vaccinated, which strain they’ve contracted and how severe their illness becomes.”

She adds: “The data are also used by the World Health Organization to

identify new flu strains and anticipate possible pandemics.”

WHAT THE FUTURE HOLDS

Although Baylor Scott & White’s participation in the study for the current grant cycle culminates at the end of the 2015–16 flu season, Dr. Gaglani says the full impact of her team’s research may be yet to come.

“It’s my hope that the information we’ve gathered will ultimately be used to develop more effective flu vaccines,” she says. “I look forward to the day when one vaccine will protect us against a wider range of viruses, for more than just one season.”

ABOUT THE STUDY

U.S. Flu Vaccine Effectiveness Network

Researchers collect data for the Centers for Disease Control and Prevention on how well seasonal flu vaccines are working.

Key Contributors:

Baylor Scott & White Health
Centers for Disease Control and Prevention

MORE

Get the Latest

Visit BaylorHealth.com/AdvancingMedicine and researchers.sw.org to learn about medical research like this at Baylor Scott & White.

WHAT'S ONLINE

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



RECIPE

Skinny Mashed Potatoes

Chicken broth gives these root veggies flavor with fewer calories than butter. Take as a side to your next holiday party!

→ Visit [BaylorHealth.com/Recipe](https://www.baylorhealth.com/Recipe) for the ingredients and directions.



PODCAST

AMP UP YOUR BRAIN POWER

Who doesn't want to keep a sharp mind? It's easier than you might think. Our three-minute podcast includes tips like playing computer games and puzzles and using your nondominant hand for everyday tasks.

→ Go to [BaylorHealth.com/Podcast](https://www.baylorhealth.com/Podcast) to hear more.

TIPSHEET

Eat, Drink and Be Healthy

Don't let a fear of weight gain keep you from the culinary joys of the holidays. Instead, check out our list for the best food and drink choices to make while you're celebrating.

Download the guide at [BaylorHealth.com/Tipsheet](https://www.baylorhealth.com/Tipsheet) today.



ONLINE

Health Information You Can Trust

→ Visit [BaylorHealth.com/Plano](https://www.baylorhealth.com/Plano) to find reliable health and wellness information on the Web.

QUIZ

HOW MUCH DO YOU KNOW ABOUT DIABETES?

If you have diabetes or think you might be at risk for the disease, it's important to educate yourself.

→ Take a quiz at [BaylorHealth.com/DiabetesQuiz](https://www.baylorhealth.com/DiabetesQuiz), and then share the results with your doctor.



Community Calendar

November & December 2015

Registration required for all events unless otherwise indicated.

→ Call **1.800.4BAYLOR** to register.

MAMMOGRAPHY

Saturday Mammography Services

8 a.m. to noon.

Register for a screening

at BaylorHealth.com/PlanoBreastImaging or call

469.814.5500. Most insurance plans are accepted.

Nov. 7 and 21; Dec. 5 and 19: Women's Imaging Center at Baylor Plano. **Nov. 14 and Dec. 12:** Baylor Plano's Elizabeth Jekot, MD Breast Imaging Center.

SEMINARS AND SUPPORT GROUPS

Diabetes Support Group

Second Thursday of each month, 7 to 8 p.m. Conference Room A & B, Garden Level of Baylor Plano.

Cancer Connections

First and third Wednesday of each month, 6 to 7:30 p.m. Education Center, Garden Level of Baylor Plano.

Cancer Conversations

First Wednesday of each month, 5:30 to 7 p.m. Education Center, Garden Level of Baylor Plano.

Cancer Transitions

Second Monday of each month, 6 to 7:30 p.m. Education Center, Garden Level of Baylor Plano.

Joint Pain Seminar

Third Wednesday of each month, 6 to 7 p.m. Education Center, Garden Level of Baylor Plano.

Kids Cancer Connect

First Wednesday of each month, 5:30 to 7 p.m. Education Center, Garden Level of Baylor Plano.

SPOHNC Support program for people with oral, head and neck cancer. Second Monday of each month, 6 to 7:30 p.m. Education Center, Garden Level of Baylor Plano.

Us TOO Prostate Cancer

Second Monday of each month, 6 to 7:30 p.m. Education Center, Garden Level of Baylor Plano.

Weight Loss Surgery Support Group

Second Wednesday of each month, 6:30 to 8:30 p.m. Education Center 1 & 2, Garden Level of Baylor Plano. To register, call **469.814.5677**.



For ouches to achoos.

Get the professional care you need at our Urgent Care Center in Sports Village.

At Baylor Medical Center at Frisco's Urgent Care Center, caring doctors on our medical staff, along with nurses and medical professionals, are ready to provide quick attention and the quality care Baylor is known for. Our Urgent Care Navigator service can refer you to a specialist or primary care doctor, and even help with the continuation and follow-up of your care. It's the quality care you need from the name you have come to trust. Baylor.

Services/problems diagnosed and treated:

Imaging services	Minor conditions	Rashes and poison ivy
Laboratory services	Minor eye injuries, infections and irritations	Sore throats, colds and flu
Back strain	Minor fractures	Sports physicals
Cuts and minor wounds	Muscle aches and pains	Sprains and strains
Earaches	Nebulizer treatments for allergies and asthma	
Flu shots		
Minor burns		

For more urgent care information call 214.407.5310, **1.800.4BAYLOR** or visit BaylorHealth.com/Frisco

Inside FieldhouseUSA 6155 Sports Village Road, Frisco, TX 75034
Open Monday - Saturday: 12 p.m. to 10 p.m.; Sunday: 8 a.m. to 6 p.m.



Urgent Care Center
Sports Village