

Health Connection



A PUBLICATION OF BEDFORD COUNTY MEDICAL CENTER

CEO update

In September, the final piece of structural steel was raised on the foundation of Bedford County Medical Center's (BCMC) new replacement facility. On September 6, at the same site, we celebrated our building's foundation by celebrating the foundation of medical care in our community: our physicians. Those who have maintained continuous active staff privileges at BCMC for more than 10 years were honored:



Bill Macri
Chief Executive Officer

Lynette Adams, M.D.
Nabil Atalla, M.D.
Terrell Blanton, M.D.
Domenic Cannonico, M.D.
Kent Clark, M.D.
Aldo Ilarde, M.D.
Frank Jayakody, M.D.
Barbara Kaczmaraska, M.D.
Howard Rupard, M.D.
Michael Tepedino, M.D.

CELEBRATING A PHYSICIAN OF LONG STANDING

Lana Beavers, M.D., was given special recognition for her 30-plus years of caring in our community. Dr. Beavers joined BCMC in 1977 and has provided a wide range of medical services to our patients, including family practice, obstetrics, pediatrics and general surgery. Over the course of her career in Shelbyville, Dr. Beavers has delivered more than 5,000 infants, performed more than 6,000 surgical procedures and cared for countless patients in the hospital, in the emergency room and in her office. We want to thank Dr. Beavers for her long-standing dedication and service.



176 YEARS OF SERVICE

We want to thank all of our founding physicians who, combined, have given more than 176 years of service to the community. This new facility is dedicated to meeting and exceeding the level of care we continue to give our patients.

Thank you!

BILL MACRI
Chief Executive Officer
Bedford County Medical Center

WHEN IT'S AN EMERGENCY

Take action when every second counts

When medical emergencies arise, it's not always easy to think clearly. But, when someone is hurt or in danger and needs immediate help, calling for emergency medical assistance is the best way to get that help—for you or someone else.

A crisis demands that you act quickly rather than waste time deciding whether to call for assistance. Sometimes people have difficulty assessing the level of urgency in an emergency situation. It's better to err on the side of caution and make that phone call. Always consider a situation more serious rather than less serious, especially if you aren't sure of the medical implications.

The best time to prepare for an emergency is before it happens. Make sure you keep all emergency numbers posted near your phone where family members can see them. When you call for immediate medical assistance, be prepared to tell the dispatcher about the emergency.

SPECIFIC QUESTIONS THE DISPATCHER MAY ASK

- **Where is the emergency?** Give your exact whereabouts such as street address, building number, apartment number, floor, nearest intersection and town.
- **What is the emergency?** Tell the dispatcher exactly what's wrong.
- **What is your name?**
- **What is the phone number** you are calling from?
- **Who needs help?** Be sure to give the approximate age of the injured and the number of people who need emergency care.
- **What is the condition of the victim(s)?** For example, is the person(s) conscious or unconscious, breathing normally, able to talk and so on.

ADDITIONAL INFORMATION TO ASSIST WITH THE CALL

- Listen to the specific instructions the dispatcher gives you on how to care for the injured until an ambulance arrives. Your ability to communicate the facts clearly and take instruction carefully could mean the difference between life and death.
- Don't hang up! Stay on the line and remain calm until the dispatcher tells you it's OK to hang up.

Sometimes people are confused about when to call for emergency assistance. Remember, when in doubt, call for help!



Be prepared



1. Know basic choking rescue techniques, such as the Heimlich maneuver.
2. Take a CPR class.
3. Cover burns with cool (not cold) wet cloths. Never apply home remedies (butter, ice, petroleum jelly). Never break blisters or remove burned skin.
4. Never move a person who has a back or neck injury.
5. Know how to stop a wound from bleeding. (A first-aid class can help.)
6. Keep individual medical history information handy.



When there's no lump

What you need to know about inflammatory breast cancer

While a breast lump is one of the classic signs of breast cancer, not every form of the disease bears this warning sign. Inflammatory breast cancer (IBC) is a rare but deadly form of cancer that often remains silent until it has spread.

IBC appears in women at an earlier average age than other forms of breast cancer—about age 52 versus 62—and accounts for up to 5 percent of all breast cancer cases in the United States. Although its prognosis has improved over the years, its five-year survival rate is still only about half that of non-IBC cases, or about 40 percent. While its cause is not entirely known, some studies have suggested family history may play a role in a woman's risk of developing the aggressive disease.

Despite its name, IBC isn't a product of inflammation. Rather, the disease occurs when cancerous cells block the lymphatic vessels in the breast's skin. Instead of a lump, you may notice that certain areas of the skin feel warm, appear red or bruised or look thicker. Your breast may also feel heavy. Other symptoms that develop in an affected breast include:

- tenderness or swelling
- itching
- pain
- skin texture like an orange peel
- enlarged lymph nodes under the arm, above or below the collarbone

- flattened or inverted nipple
- swollen or crusty nipple skin
- discoloration of skin around the nipple (areola)

IBC symptoms can easily be confused with a breast infection. However, it doesn't cause a fever and doesn't respond to antibiotics like an infection does. If you're experiencing any of the symptoms listed, contact your healthcare provider immediately. Because the disease spreads rapidly—changes in your breast can become noticeable in a matter of days—many women are already in advanced stages of IBC by the time they're diagnosed. If your healthcare provider suspects cancer, he or she will perform a biopsy to analyze a sample of your skin and tissue.

TREATMENT

Chemotherapy, surgery and radiation therapy are often combined to treat cases of IBC. Removal of the affected breast is often recommended following a treatment such as chemotherapy.

The chances of recurrence for this type of cancer are high. Further chemotherapy or hormone therapy, such as tamoxifen or anastrozole, may be necessary to help prevent the cancer from returning.

IBC is a scary diagnosis, but you can empower yourself against the disease by becoming educated. Talk to your healthcare provider about what to expect before and after treatment.

Pain in the neck? Physical therapy to the rescue!

A crucial component
of the healing process



Laurence Schwartz, D.O.
Orthopedist

If you suffer from back or neck pain, arthritis or muscle strain that's preventing you from participating in your normal activities, raise your hand (if you can). Physical therapy may help you return to your pain-free life-

style—and help you raise that hand!

A DIFFERENT APPROACH

Bedford County Medical Center (BCMC) is fortunate to have Jeremy Gray, P.T., MSHA, as the director of the physical therapy department. Before moving to Shelbyville, Gray was with the University of Alabama at Birmingham; he has 10 years of physical therapy



experience in sports medicine, orthopedic specialization and wound care.

Gray uses a more “hands-on” manual approach to physical rehabilitation. “I use a deeper massage technique,” says Gray, “which has been proven to provide better results with a lot less pain and swelling.”

Miranda Hurt, P.T., is a member of the BCMC physical therapy team; she had previously worked at the Corning Hospital and Wellness Center in southern New York. “Hurt’s experience in outpatient orthopedics and geriatric rehabilitation and her lymphedema treatment certification make her a great asset to our team,” says Gray.

Laurence Schwartz, D.O., an orthopedist who recently relocated his Fayetteville practice to BCMC, works closely with Gray and his team. Dr. Schwartz brings expertise in minimally invasive hip, knee, hand and total joint replacement surgeries to our community.

MORE THAN ‘JUST’ PHYSICAL THERAPY

Occupational therapy, another service provided by the BCMC physical therapy department, focuses on the acti-



Our team includes Miranda Hurt, P.T. (left); Jeremy Gray, P.T., MSHA, physical therapy department director; and Jana Wilkerson, O.T., who are ready to help you get back to everyday activities.



PHYSICIAN SPOTLIGHT

Bedford County Medical Center is proud of its experienced physicians. We would like to introduce you to two of them.



**CRISTINA S. PARAWAN, M.D.,
FACP**
Family Practice

Medical Arts Building
841 Union St., Suite 108
Shelbyville

Cristina S. Parawan, M.D., FACP, has been a family practice physician at Bedford County Medical Center since 2002. She is a member of the American Academy of Family Physicians and the American Medical Association.

Dr. Parawan received her medical degree at Cebe Institute of Medicine in the Philippines and completed her residency at Howard University Hospital in Washington, D.C. She served as a staff physician at Florida Healthcare in Orange City, Fla., for five years.

Dr. Parawan and her husband, Larry, relocated to Shelbyville with their two sons, Ryan and Lawrence III, and are parishioners at St. William's Catholic Church.

During her days off, Dr. Parawan enjoys spending time with her family, cooking, cleaning and window shopping. She also enjoys playing with and caring for her seven dogs.

To schedule an appointment with Dr. Parawan, call **(931) 680-4990**.



LINDA MOYD, M.D.
Pediatrics

Medical Arts Building
841 Union St., Suite E
Shelbyville

Linda Moyd, M.D., is a pediatric physician who joined the Bedford County Medical Center (BCMC) staff in August. She received her undergraduate degree in biomedical engineering from Oral Roberts University in 1991 and her medical degree at the University of Cincinnati Medical School. Dr. Moyd completed her internship and pediatric residency training at the University of Mississippi Medical Center Blair E. Batson Children's Hospital in Jackson, Miss. Dr. Moyd served as a practicing pediatrician in Brandon, Miss., for five years before relocating to Shelbyville.

Dr. Moyd and her husband, Ludlow, moved to Shelbyville with their daughter Skye, 5. She enjoys spending time with her family and attending church. Dr. Moyd is very grateful to be a part of BCMC and the Shelbyville community.

To schedule an appointment with Dr. Moyd, call **(931) 685-5566**.

vities of daily living, such as getting in and out of bed, getting dressed, taking a shower, eating and more. Valerie Simmons, O.T.R./L., a certified occupational therapist specializing in stroke rehabilitation, and Jana Wilkerson, O.T., are both dedicated to getting patients back into "the business of life."

BCMC's physical therapy department is located in the Medical Arts Building, Suite 104, at 841 Union St. Office hours are Monday through Friday, 8 a.m. to 5 p.m. To schedule an appointment, call **(931) 685-5575**. Patients must have a physician referral for an appointment.

Dr. Schwartz is with Advanced Orthopedics in the Medical Arts Building, Suite J. To schedule an appointment, call **(931) 685-5483**.

Did you know?

The BCMC Physical Therapy Department also treats workers' compensation injuries and accepts most insurance plans.

HEALTHWISE QUIZ

How much do you know about the flu?

Take this quiz to find out.

1

Flu season runs from:

- a. November to April
- b. October to February
- c. January to December
- d. December to March

2

About how many Americans die each year from complications of the flu?

- a. 900
- b. 5,600
- c. 15,600
- d. 36,000

3

The best thing you can do to avoid getting the flu is:

- a. take a daily multivitamin
- b. get vaccinated
- c. exercise at least five days a week
- d. avoid intimate contact with people

4

Flu is most often spread by:

- a. mosquitoes
- b. doctors and other healthcare providers
- c. people who cough or sneeze virus-infected droplets into the air
- d. the flu vaccine

5

Which of the following statements about the flu is not true?

- a. It's useless getting vaccinated after the season begins.
- b. Getting the flu can lead to pneumonia and other life-threatening complications.
- c. People who are allergic to eggs should not get a flu shot.
- d. You can spread the flu to others before your symptoms show.

The weakest link: Understanding abdominal aortic aneurysm

As the body's largest blood vessel, the aorta has the important job of carrying blood from your heart throughout the rest of your body. When the aortic wall in your abdomen weakens or becomes damaged by plaque buildup, it enlarges, causing an aneurysm, or bulge. Aneurysms that grow too large can burst, causing potentially fatal internal bleeding.

Three out of four people with an abdominal aortic aneurysm (AAA) have no symptoms, although some patients may feel back pain; intense, intermittent abdominal pain; or a pulsating sensation in the abdomen.

WHO'S AT RISK?

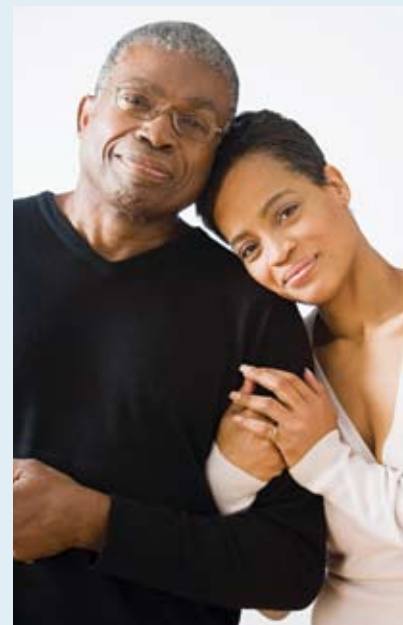
AAAs occur most often in men older than 65. Most aneurysms are caused by atherosclerosis—hardening of the arteries, which can result from a fatty, high-cholesterol diet. Other conditions that increase risk are smoking, high blood pressure, diabetes, congenital defects and a family history of aneurysms.

Decrease your chances of developing an aneurysm by not smoking; eating a low-fat, low-cholesterol diet; exercising regularly; and controlling blood pressure.

HOW IS AAA TREATED?

Treatment depends on the aneurysm's size and whether it's life-threatening. Most aneurysms are less than 2 inches in diameter and seldom rupture. If you're diagnosed with this type of AAA, your doctor will likely monitor it and prescribe blood pressure-lowering medicine. But if you have an aneurysm that leaks, is small but grows quickly, expands to greater than 2 inches or seems about to burst, your doctor can surgically repair the damaged part of your aorta.

When an aneurysm ruptures, the results can be fatal, so immediate medical attention is needed. Symptoms of a ruptured aneurysm include sudden, severe pain with rapid pulse, sweatiness or clamminess, anxiety, nausea and vomiting, low blood pressure, dizziness, fainting, dry mouth and paleness.



ANSWERS: 1. A; 2. D; 3. B; 4. C; 5. A



Take steps now to prevent diabetes in your child

About 15 percent of children and teens are overweight—double from 20 years ago. This has led to a surge in the number of children with type 2 diabetes, the form more commonly found in overweight adults over age 40. According to

experts, one in three American children born in 2000 will develop diabetes if we don't take steps now to address their fatty diets and poor fitness habits.

Talk to your family doctor about diabetes testing if your child seems to be gaining too much weight or is already overweight and has any of these risk factors:

- a family history of type 2 diabetes, particularly among first- or second-degree relatives
- being of African-American, Hispanic/Latino, Native

American or Asian/Pacific Islander descent

- signs of insulin resistance or conditions associated with insulin resistance such as high blood pressure, poor cholesterol and triglyceride levels and *acanthosis nigricans*, a condition where the skin around the neck or in the armpits appears dark, thick and velvety

WHAT YOU CAN DO

- **Eat at home.** Avoid super-sized fast-food meals on the run. Make the time to cook and eat healthy family fare.
- **Limit screen time.** The sedentary nature of modern play-time—TV, video games and using the computer—has contributed to overweight kids.
- **Exercise together.** Make physical activity a group event. Go on a family hike or bike ride. Join a gym together or enter family fun walks.
- **Don't use food, sweets or candy as rewards or gifts.** Try activity-minded presents such as jump ropes, kites, pogo sticks or scooters.

Give your fridge a health makeover

When it comes to wellness, we are what we eat. To benefit your heart, food choices must be low in saturated fat, the number-one dietary contributor to cardiovascular disease. Culprit foods include those from animals—primarily meats and whole-milk products—and from certain plant-based oils—coconut, palm and cocoa butter. Evict those and other artery-clogging foods from your icebox and replace them with the foods on this heart-smart guide from the American Heart Association:

- **Fruits.** Buy fresh, frozen or canned—but select fresh if you have a choice. Check labels on canned fruits, especially those packed in syrup, for calories.
- **Veggies.** Again, fresh is best. Frozen or canned are good choices, too, but watch salt content. Avoid sauces and other gimmicks, like flavor pouches.
- **Meat, poultry and fish.** Buy skinless poultry and lean beef, veal, lamb and pork with all fat trimmed away. Canned tuna and salmon packed in water are excellent low-fat choices.
- **Meat substitutes.** Try dried beans, lentils and soybean items like tofu and tempeh.



- **Drinks.** Store orange, grapefruit, prune, apricot or grape juices or low-salt tomato or vegetable juices. Stash a pitcher of cold water in your refrigerator, too.
- **Dairy.** Stock up on low-fat favorites like low-sodium cottage cheese, mozzarella, ricotta and Neufchâtel, along with yogurt and either skim or 1 percent milk.
- **Fats and oils.** Go with unsaturated oils—canola, olive, corn, cottonseed, peanut, safflower, soybean and sunflower. Buy unsalted, low-fat margarine and low-fat, low-sodium mayonnaise and salad dressing.
- **Sweets.** Enjoy (in moderation) gelatin, cocoa, frozen juice bars, sorbet, sherbet, jelly, jam, preserves, apple butter, maple or cane syrup, honey, molasses or fig bars.

An inspiring note to Bill Macri, CEO

Bedford County Medical Center

Please accept my thanks to you and your staff. Your visits were a welcome sight. Pam Fisher, PR/marketing director, catered to the needs of my family, and Linda Griffin, R.N., greeted me and was great in preparing me for surgery. Lori Davis, R.N., in Recovery was most kind when I returned from surgery. The anesthesiologist was most helpful and visited me often. Dr. Russell is a credit to your medical staff.

“There were many others who performed services, but I don’t know their names. In spite of having to have surgery, my hospital experience was a good one.

“Thanks to all who were efficient and friendly in every way.”

—Joe Fanning, patient from Lynchburg

The Wartrace Clinic is here to help

Female wellness checkups, laboratory services, and mole and skin tag removals are some of the procedures and services available at the Wartrace Clinic. “We treat everyone from newborns to geriatric patients with a wide range of ailments. As an added benefit, we offer our patients a short wait time and a friendly, courteous staff,” says Jennifer Bombardi, a certified family nurse practitioner at the clinic. Debra Baylor, M.D., a specialist in internal medicine, is the clinic’s medical director.

The Wartrace Clinic is located at 507 W. Blackman Blvd. in Wartrace and is open Monday through Friday, 8 a.m. to noon and 1 to 5 p.m. To schedule an appointment, call (931) 389-0600.



Make a great meal good for you

Although dining out is as American as apple pie, this favorite pastime can also be a diet killer. The good news is that many restaurants feature “lite” menu selections that cater to today’s weight watchers. These strategies can help keep your belt on the same notch tomorrow morning:

- Trim your calories a bit a few days before your night out. That way, you can indulge and not gain.
- Don’t go to the restaurant super-hungry. You’ll blow your budget and your waistline. Hint: Have a small snack at home if your tummy’s growling—fruit slices, graham crackers or a glass of milk.
- Alcohol has calories, too, so they must be added to your total caloric intake for the evening. If you wish to indulge, order wine by the glass.
- Ask your waiter to skip the breadbasket. Or move the bread to the far side of the table.
- When looking over the menu, watch for these good-health words: steamed, poached, boiled, baked, broiled and grilled. They translate to lower fat. On the other hand, skip high-fat items with these words: fried, sautéed, crispy, creamy or breaded.
- When your meal arrives, ask yourself, “Do I eat this much at home?” If the answer is no, cut the meal in half and ask for a doggie bag before digging in.

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