

Your resource for life.

MaineGeneral Health

JOURNAL OF WELLNESS AND GOOD HEALTH CARE

FALL 2010

Farm to fork

Fresh, local produce
is what's cooking at
MaineGeneral Health.

MaineGeneral
Health takes care
to serve healthy,
sustainable food.



Your resource for life.

MaineGeneral Health

www.mainegeneral.org

Advancing care, right here, right now. Setting an example for healthy eating, helping patients get back to a healthy weight and bringing advanced treatment to prevent esophageal cancer and special care for women are all part of ensuring you have the care you need, when you need it.

When we support local businesses, we continue a cycle of economic investment that reaps rewards for all of us.



Scott B. Bullock,
president
and CEO,
MaineGeneral
Health

Keeping it local

THE KENNEBEC VALLEY IS MORE than just home to MaineGeneral Health. It's also home to our more than 3,800 employees, physicians, vendors and contractors. It's where we work, where we live and where we choose to raise our families.

I'm pleased to note that our connection to the local community is stronger than ever. In this issue you will read about our efforts to bring fresh, locally grown produce to our patients' plates. Supporting local farmers is good for the local economy, but more important, local produce is better for the health and well-being of the people we serve.

MaineGeneral has a history of bringing new technology and new procedures to the region, and that's important for both the local economy and the convenience of our patients. This issue includes articles about our bariatric center and our new incontinence program. You will also read about a new state-of-the-art procedure to treat Barrett's esophagus, a common condition caused by frequent heartburn and acid reflux. MaineGeneral is one of only two medical centers in the state to offer this treatment.

Recently, MaineGeneral's Harold Alfond Center for Cancer Care

received Quality Oncology Practice Initiative certification. This recognizes excellence in the treatment of cancer. Our center was the only facility in New England to earn this distinction, and we are especially proud of that achievement.

I believe, as do all of us at MaineGeneral, in the importance of keeping it local. When we bring new, better technology to the region, it means you can remain closer to home for care. When we win awards for our work, it proves that the Kennebec Valley region can compete on a national level. And when we support local businesses, we continue a cycle of economic investment that reaps rewards for all of us.

We're confident that early this fall we will get state approval to move forward with our plans to build a new regional hospital. That project will combine the best of local and national expertise, bring more than \$266 million into the state in direct and indirect spending and support 352 construction-related jobs.

We hear a lot about the global marketplace, but there's no place like home when it comes to health care. I'm proud that MaineGeneral works hard to keep it local for you. We want to be your resource for life! □

MAINEGENERAL HEALTH is published as a service for the people of the Kennebec Valley region. Most of the information in MAINEGENERAL HEALTH is written by MaineGeneral's marketing and communications staff. Most of the photos also are produced by the staff.

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From 'Big Lew' to 'Bones': *A weight-loss success*

By Diane E. Peterson

HIS COLLEAGUES USED TO call Lewis Harthan "Big Lew." These days they call him "Bones."

Now at a trim 187 pounds, the 57-year-old Greene resident has lost 322 pounds since his laparoscopic gastric bypass surgery at MaineGeneral Medical Center in February 2008.

Heavy all his life, Harthan recalls his mother shopping in the husky section for his first Cub Scout uniform and having to special-order his band uniform in high school because the regular uniforms were too small.

Dieting was not the answer.

"I tried every diet in the world," Harthan says. "Every four or five years, I would lose 70 or 80 pounds, but it always came back plus an additional 20 pounds. I just gave up after a while."

But when his doctor told him if he didn't lose weight he would be dead within a year, Harthan knew it was time to consider weight-loss surgery.

"It took me a long time to get there," he says. "It's a huge decision. I was scared and really didn't know what was going to happen. It's a frightening thing."

But after attending a weight-loss surgery seminar by MaineGeneral's Bariatric Center, Harthan knew he'd found the solution that was right for him.

"Everybody was empathetic, understanding and committed to making it a good experience," he says. "And they explained everything. They outlined what was going to happen and what I could expect. I was so impressed with the whole process. They're so behind you and so willing to help."

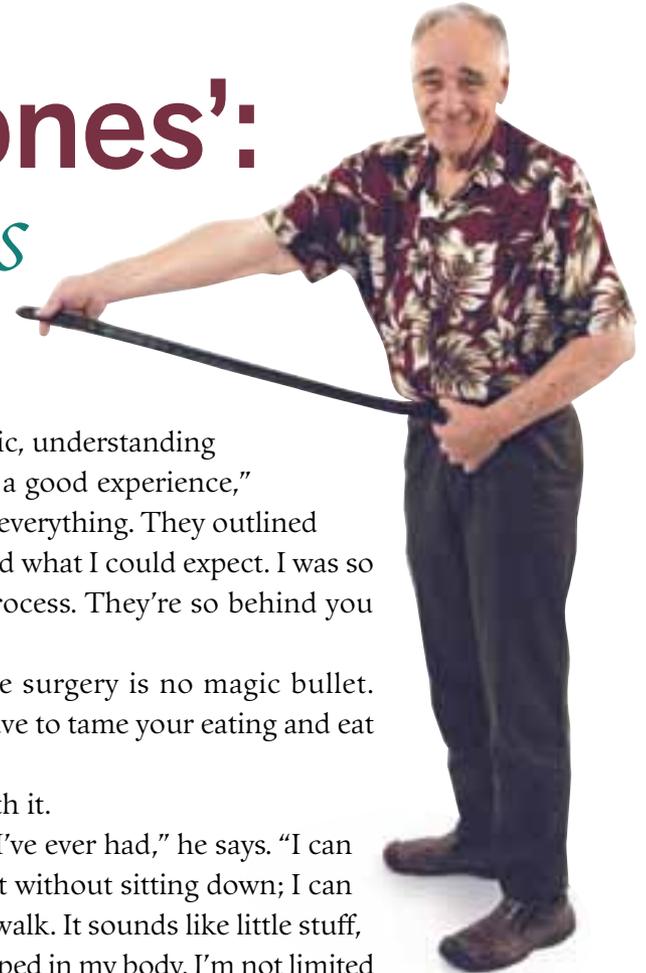
He acknowledges that the surgery is no magic bullet. "You have to exercise; you have to tame your eating and eat healthier food."

But for him, it was all worth it.

"I have more energy than I've ever had," he says. "I can walk around the supermarket without sitting down; I can mow the lawn; I can go for a walk. It sounds like little stuff, but it's not to me. I'm not trapped in my body. I'm not limited by anything. It's a miracle."

His medical problems associated with his weight have disappeared. His blood pressure is under control, his type 2 diabetes is gone, and he no longer has sleep apnea or shortness of breath.

And Harthan is looking forward to getting his private pilot's license reactivated. Unable to fit into the cockpit since age 27, he's now back flying. □



"I'm not limited by anything. It's a miracle."

— Lewis Harthan

SURGERY OPTIONS

MaineGeneral's bariatric surgeon specialist, Huy Trieu, MD, offers three types of weight-loss surgery: laparoscopic bypass, Lap-Band® and gastric sleeve. Last year, patients in the comprehensive weight-loss surgery

program lost 9,495 pounds. To qualify for weight-loss surgery, patients must:

- Be at least 18 years old;
- Have a body mass index of 35 with weight-related medical problems such as high blood pressure or diabetes; or
- Have a body mass index of 40; and

- Have made a legitimate attempt to lose weight through diet and exercise.

For more information, please call the MaineGeneral Medical Center's Bariatric Center at **626-1078** or toll-free **800-971-8150**.

Judy MacKenzie, RN, women's health navigator, connects women with the treatment they need.



By John D. Begin

It's embarrassing. It's personal.

And until recently, there was no one resource women could turn to for help in treating incontinence.

Judy MacKenzie, RN, is just one phone call away from connecting women with solutions to this very common problem.

As MaineGeneral Medical Center's new women's health navigator, MacKenzie offers women personalized and confidential support to help them negotiate the often confusing process of receiving care. It's an added service that sets MaineGeneral's comprehensive incontinence program apart from others.

MacKenzie says she's been approached by women she's known for years who want to seek treatment.

A confidential, *personal* approach to dealing with incontinence

"It's very important for women to have a personal approach to treating this condition and to have someone by their side helping them every step of the way."

— Judy MacKenzie, RN

"They want help but need to feel comfortable discussing the problem," she says. "It's very important for women to have a personal approach to treating this condition and to have someone by their side helping them every step of the way."

Finding the right solution

Many women think incontinence is a result of aging or an inevitable consequence of post-pregnancy body changes.

But whatever the cause, women shouldn't let bladder control problems prevent them from participating in activities they enjoy, MacKenzie emphasizes. MaineGeneral offers a variety of successful and fairly simple treatment options

ranging from pelvic floor strengthening exercises to physical therapy and from biofeedback to medication. For stress incontinence, one of the most common types, there's also a minimally invasive surgery, which has very high success rates and a very quick recovery time.

"Many women suffer in silence, because they think it's just what happens after you have babies or grow older," MacKenzie says. "But that doesn't have to be the case."

Karen Bossie, DO, an obstetrician/gynecologist (OB/GYN) at Waterville Women's Care, agrees.

"It's a huge quality-of-life issue, and there's no reason to live with it," she says. Bossie is one of many MaineGeneral OB/GYNs and urologists who treat this problem.

What's stress incontinence?

"Most people associate urinary stress incontinence with

urine leakage that occurs when a woman sneezes, coughs, laughs or performs physical activity," says Mark Cooper, MD, FACOG, an OB/GYN at Kennebec Valley OB/GYN. "But many women leak urine while doing very normal activities."

Female stress urinary incontinence results when muscles that support the bladder and close the urethra lose tone. It can affect women of all ages, but doctors agree that childbirth with vaginal deliveries, loss of estrogen at menopause, loss of muscle tone over time and even heredity are contributing factors.

According to the National Association for Continence, an estimated 18.3 million women in the U.S. experience urinary incontinence, and less than half (an estimated 30 to 45 percent) seek help to treat it. □

For more information or to connect with Judy MacKenzie, call toll-free 877-894-2282.

"It's a huge quality-of-life issue, and there's no reason to live with it."

— Karen Bossie, DO, OB/GYN

A PERFECT FIT

Judy MacKenzie never thought she'd stay in the same job for her entire nursing career.

So when she left a 25-year stint in MaineGeneral Medical Center's Maternal Child Health (MCH) unit to become its women's health navigator in January 2010, the transition was the realization of her desire for change.

"A lot happens in your life in 25 years, and you celebrate a lot of life events. Because of that, I developed some very strong bonds with the maternity staff," she says. "It was hard to leave, but I'm excited about this new opportunity, because I feel very passionate about my new role."

MacKenzie started her career with MaineGeneral in October 1983, working as a staff nurse and relief charge nurse in the

Orthopedics department at MaineGeneral's Thayer Campus. She later accepted a nursing position in Thayer's MCH unit and became the unit's clinical educator when the position was created in 1985.

In that role, MacKenzie coordinated nursing education programs and new-employee orientation for staff joining the department. Part of the MCH management team, she also developed training programs when new equipment was implemented and filled in for managers and staff nurses when needed.

"This is home for me," she says, adding that she has enjoyed interacting with patients from the greater Waterville area — and now



Judy MacKenzie, RN, discusses bladder control problems confidentially and personally.

throughout the Kennebec Valley thanks to her new role — during her career.

"The MaineGeneral family takes great care of their patients, and I've been fortunate to be a part of that," she says. "I'm proud to be part of the MaineGeneral team. It's a great place to work."

Stopping esophageal cancer before it starts

By Diane E. Peterson

FOR MORE THAN 30 YEARS, Gary Simons was taking two prescription medications and downing nearly a bottle of over-the-counter antacid every day to manage his chronic heartburn, or gastroesophageal reflux disease (GERD).

The years of irritation caused by stomach acid backing up into his esophagus were taking a toll.

Constantly awash in acid, the cells lining his esophagus had mutated into a precancerous condition known as Barrett's esophagus. Left untreated, Barrett's esophagus can progress into esophageal cancer, one of the nation's fastest-growing cancers, which is often fatal.

Until recently, managing Barrett's esophagus was hit or miss. And, once cancer developed, the only cure was to surgically remove the esophagus, a risky and life-changing operation.

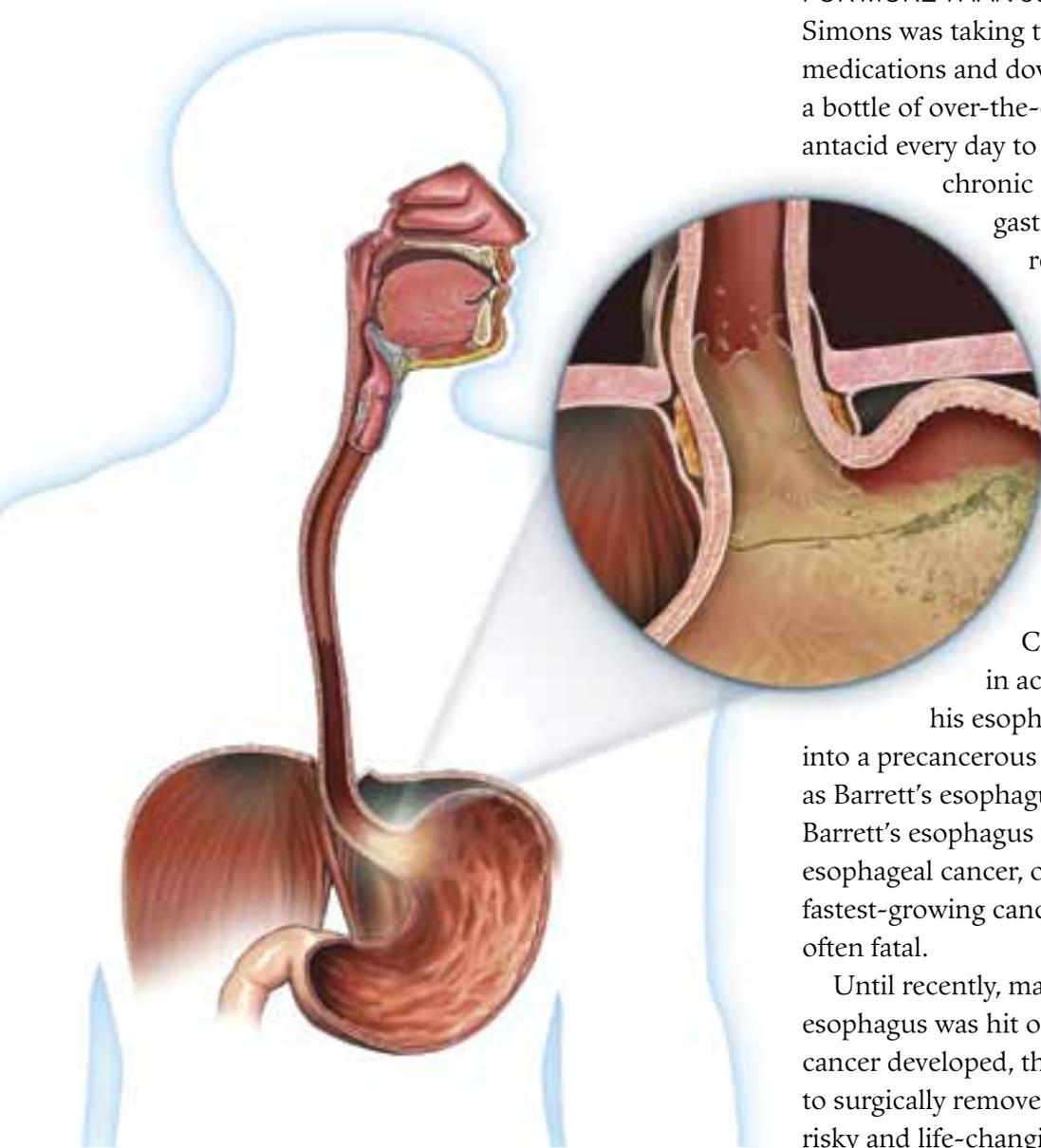
"Unfortunately the standard of care has been frequent surveillance endoscopies, taking random biopsies of the esophagus and looking for very early tumors and removing them," explains gastroenterologist Sean McGarr, DO, medical director of the gastroenterology oncology program at MaineGeneral Medical Center's Harold Alfond Center for Cancer Care. "Depending on the area involved, that's a lot of biopsies, and it's easy to miss tissue that is progressing to cancer."

A new standard of care

Today, a safe and effective outpatient treatment available at MaineGeneral is having dramatic success preventing Barrett's esophagus from progressing to cancer. Known as the HALO ablation system, the 30-minute procedure focuses high-energy radio waves to zap and burn out Barrett's tissue. MaineGeneral is one of only two medical centers in the state to offer this treatment.

"For the first time in central Maine, we have a way to prevent this devastating cancer," McGarr says. "This technology is so slick and easy to perform. And we're seeing dramatic results in changing patients' short- and long-term risk of cancer. This is a cancer we can do something about. HALO has become the new standard of care for Barrett's esophagus."

The potential impact of this treatment for Mainers is enormous, he says. Because of the high rate of tobacco and alcohol use, obesity



and limited access to health care, the incidence of esophageal cancer is much higher in Maine than the national average, McGarr explains.

What's involved

Patients are sedated, but no incisions are required. McGarr inserts a small, flexible tube with a tiny camera through the mouth and into the esophagus to look at the area of Barrett's.

For large areas of Barrett's tissue, a sizing balloon is inserted that expands to fill the esophagus. A second balloon, which mimics the sizing balloon, delivers a burst of radiofrequency to burn out the affected tissue. For smaller, more isolated areas of Barrett's tissue, McGarr uses a more focused, "point-and-shoot" approach. Both approaches spare surrounding healthy tissue.

It usually takes two or three treatments to completely destroy the abnormal tissue, McGarr says. "We do one treatment and bring patients back in two months to take a look and reassess."

The new technology came just in time for Simons, who has had two treatments and whose Barrett's has cleared up. The 57-year-old Bar Harbor resident was told his condition was progressing to cancer, and that without HALO treatments, he would need major surgery.

"My doctor told me the alternative was to undergo grueling surgery to open my chest and remove that section of my esophagus," Simons recalls. "It's a huge relief."



Gastroenterologist Sean McGarr, DO, readies the equipment for HALO treatment. MaineGeneral is one of only two hospitals in the state to offer this treatment, which treats Barrett's esophagus before it becomes esophageal cancer.

Little pain, fewer worries

Like Simons, patients usually experience only minimal post-procedure discomfort and are back to their regular diet within days.

"I was honestly surprised by the small amount of pain afterwards," he says. "I had a couple of days of difficulty swallowing and then nothing. The recovery was a piece of cake."

"Patients easily manage their pain at home using over-the-counter pain medications," McGarr says. "We restrict patients' diets to clear liquids and soft food for the first 24 hours to allow the esophagus to heal. After that, they can go back to their regular diet."

The HALO treatment doesn't cure GERD, McGarr emphasizes. "It's important that patients continue to take acid-inhibiting medications to reduce the amount of stomach acid."

But for Simons, HALO spelled instant comfort.

"I went from drinking a bottle of Mylanta a day to ease my heartburn to no symptoms at all," he recalls. "I suffered for more than 30 years from acid reflux. With one morning's procedure, it was gone. And it's a relief not to have to worry about developing cancer. It's a miracle."

While over-the-counter antacids are no longer his constant companions, he continues to take his medications to curb GERD and prevent the return of Barrett's esophagus, following McGarr's advice.

So far, McGarr has used this new technology on patients from as far away as Madawaska. But whatever the distance, he's only a phone call away. "Patients can page me to talk to me about any concerns," McGarr says. "They need to know there's someone supporting them if they have questions." □

For more information, please call Sean McGarr, DO, at 626-1594.

Revolutionizing hospital food

MaineGeneral digs into local roots

By Diane E. Peterson

“By buying locally, we reduce the time from ground to plate, which means the produce is much richer in healthy nutrients.”

— Jean Gauthier,
director of Food
and Nutrition
Services

TOMATOES, CUCUMBERS, GREEN PEPPERS and zucchini seem unlikely items to revolutionize hospital food.

But they represent the first wave of a major initiative MaineGeneral Medical Center is taking to bring fresh, locally grown food to patient trays and cafeterias.

And they are the first items bought from area farmers instead of from the large national distributor that typically supplies MaineGeneral’s kitchens.

“We’re very enthusiastic about this program because of its multiple benefits,” says Paul Stein, administrative director of Support Services. “We want to set an example for healthy eating in our communities, reduce the amount of emissions by cutting down on the distance food travels and help sustain local farmers and the local economy.”

With more than 518,000 meals served annually to hospital and cancer center patients, visitors and staff, the potential boost to local growers is enormous.

It’s also healthier.

“By buying locally, we reduce the time from ground to plate, which means the produce is much richer in healthy nutrients,” says Jean Gauthier, director of MaineGeneral’s Food and Nutrition Services.

“We started with fresh produce that doesn’t have to be further processed,” explains Conrad Olin, manager of Food and Nutrition Services in Waterville. Further processing requires meeting strict safety standards and would require additional food service staff, food storage and space to prepare.

Community partnerships

MaineGeneral buys the produce through a partnership with Barrels Community Market, a nonprofit community market that sells locally produced foods in downtown Waterville. Barrels buys the produce from area farmers and acts as a local distributor to sell directly to MaineGeneral.

The initiative got a boost last year when the Maine Organic Farmers and Gardeners Association (MOFGA) received a two-year grant from the U.S. Department of Agriculture’s Farmers Market Promotion Program to work with MaineGeneral to increase the health care system’s purchases of foods from growers in Kennebec and Somerset counties.

David Gulak, Barrels Community Market manager, is enthusiastic about the partnership with MaineGeneral and hopes that it will serve as a model other hospitals in the state can replicate. “A huge part of what we’re doing is getting local foods into institutions,” he says. But he cautions it’s not as easy as simply lining up suppliers.

Safety first

For example, one of the first steps is to ensure that the farms are delivering safe, high-quality products, Olin emphasizes. “We need to be sure the food we serve is very safe.” Because there was no blueprint in place for directly supplying hospitals with fresh produce, MaineGeneral worked with MOFGA food safety experts to develop a set of strict safety and inspection criteria that each of the farms must meet.

While hospitals nationwide are taking similar steps,

— Continued on page 10

Partners in bringing fresh local food to hospital plates, MaineGeneral Director of Food and Nutrition Services Jean Gauthier and Barrels Community Market Manager David Gulak pose outside the downtown Waterville market.



MaineGeneral is one of the first in Maine to work with local farmers to bring fresh produce to hospital plates.

“We’re going about this initiative incrementally,” Gulak says. “In terms of streamlining farmers’ produce to hospitals, we’re building this model from the ground up.”

Just the beginning

Olin agrees. “Initially we’re looking at produce, but we’re also exploring ways to buy fresh meats, fish and other products to support local farmers and growers.”

Olin and Gauthier work with Joseph’s Market in Waterville and Fuller’s Market in West Gardiner to buy ground beef. The hospital began serving the leaner, locally supplied

hamburger on a whole-wheat roll this summer. “We’re starting with hamburger, but that’s just the beginning,” Olin says.

Commitment

Buying locally is not necessarily buying cheaper, Stein points out. “This is a huge commitment by MaineGeneral. We decided this is the direction we want to go, and if we have to pay a little more, it’s well worth it.

“We’re a health care organization, and we need to support healthy eating. We’re also part of the Kennebec Valley community, and this is just another way to help support our region. It all comes down to the right thing to do.” □

“We’re a health care organization, and we need to support healthy eating.”

— Paul Stein, administrative director of Support Services

HEALTHIER OFFERINGS

Promoting healthy, sustainable communities is a theme at MaineGeneral Medical Center. Here are some of the initiatives in place and others still in development.

Since MaineGeneral brought room service to both campuses, patients are praising the food and getting better nutrition. In turn, MaineGeneral has reduced the amount of food waste from 25 percent to 10 percent.

“If patients can select the food they like at times when they’re hungry, they tend to eat better,” says Jean Gauthier, director of MaineGeneral Food and Nutrition. “We’re also offering more healthier choices.”

Less waste also means less cost. The savings helps lower the cost for higher-priced popular menu selections such as the lobster roll.

Plans are under way to install a software program that will calculate the nutrients for each serving of every dish, including calories, fat, cholesterol, carbohydrates and protein, and print out a nutrition label like those on packaged food at the grocery store. It will make it much easier for visitors and patients to see at a glance exactly what they’re eating, Gauthier says. Currently, nutrients are calculated manually by a dietitian — a time-consuming and inefficient process.

Also in the works are plans to change vending machine policies to promote healthier choices. Visible advertisements for name-brand sodas and sugar-laden snacks, the current machines will be replaced by machines with a more generic look. Water, juice and healthy snack alternatives will be displayed at eye level to better position those items for

sale. Sodas and less-healthy snack choices will be near the bottom — still available for now, but harder to find. Both types of vending machines will include signage indicating healthier choices.

MaineGeneral also plans to bring “mini” farmers markets to the hospital campuses, where local farmers can sell their fresh produce to staff and visitors outside the cafeterias during mealtimes. Healthy, MaineGeneral-prepared recipe cards featuring the produce will also be available.

Further in the future are plans for the cafeteria in the new regional hospital opening in 2015. Although still on the drawing board, plans call for arranging food choices to promote the healthier selections first and having MaineGeneral chefs hold regular cooking demonstrations accompanied by dietitians, who will explain the food choices.



Welcome, new doctors

Gina Hoang, MD



Family medicine

Medical degree: Case

Western Reserve University
School of Medicine

Residency: Maine-Dartmouth
Family Medicine Residency

Board eligibility: American

Board of Family Medicine

Practice: Kennebec Family Practice

Logan Murray, MD



Pediatrics

Medical degree:

University of Vermont
College of Medicine

Residency: Maine
Medical Center

Board eligibility:

American Board of Pediatrics

Practice: Kennebec Pediatrics

Iris Savernik, DO



Family medicine

Medical degree:

University of New England
College of Medicine

Residency: Peninsula
Hospital Center

Board eligibility:

American Board of Family Medicine

Practice: Waterville Family Practice

Sakdhisapol Katanyutanon, MD



Gastroenterology

Medical degree:

Chulalongkorn University
Residency: St. Vincent
Hospital at Worcester
Medical Center

Fellowship: North Shore

University Hospital/New York University
School of Medicine, Manhasset

Board certification: American Board of
Internal Medicine

Practice: MaineGeneral Gastroenterology

Aamir Mushtaq, MD



Hospitalist

Medical degree: Allama
Iqbal Medical College

Residency: Eastern Maine
Medical Center Family
Practice Residency

Board eligibility: American

Board of Family Medicine

Practice: Augusta Campus

Abby Thrower, MD, PhD



Medical oncology

Medical degree: University
of Iowa College of Medicine

Residency: University of
Pittsburgh Medical Center

Fellowship: University of
Arizona Cancer Center

Board certification: American Board
of Internal Medicine

Practice: Harold Alfond Center for
Cancer Care

Robin LeBlond, MD



Pediatrics

Medical degree: Loma

Linda University School of
Medicine

Residency: University of
New Mexico Children's
Hospital

Board eligibility: American Board of
Pediatrics

Practice: Waterville Pediatrics

Timothy Nuce, MD



Family medicine

Medical degree:

St. George's University
School of Medicine

Residency: Munson
Medical Center

Board eligibility:

American Board of Family Medicine

Practice: Kennebec Family Practice

David Urquia, MD



Orthopedics

Medical degree: University
of Virginia

Residency: Duke University
Medical Center

Board certification:
American Board of

Orthopaedic Surgery

Practice: MaineGeneral Orthopedics
(Augusta and Waterville)



“The surgery went beautifully, and Dr. Meikle is quite a surgeon.”
— John Noel



After rotator cuff surgery, Fairfield resident John Noel is back to the activities he enjoys.

Back in action with surgery and rehabilitation

By John D. Begin

FAIRFIELD RESIDENT JOHN NOEL HAS nothing but high praise for the orthopedic and rehabilitation services he received at MaineGeneral Medical Center and its facility at FirstPark.

And well he should, he says, after successful rotator cuff surgery performed by MaineGeneral orthopedic surgeon Catherine Meikle, MD, in late December 2009 has him back doing some of the activities he loves — such as gardening, splitting and stacking firewood, working on his tractor and

tending to a host of projects on his 46-acre property.

“The surgery went beautifully, and Dr. Meikle is quite a surgeon,” he says. “She was very honest in explaining to me that my complete recovery could take seven to eight months. She wanted me to do what I needed to do to get better.”

The 79-year-old Noel, a former process chemist who for the past 19 years has worked a second career as a mortuary assistant, injured his right shoulder in October 2009 when he slipped on some wet leaves and fell, driving his shoulder

into some brick pilings. A diagnostic workup showed he had torn his rotator cuff, which led to surgery to repair the tear and about eight weeks of physical therapy to strengthen his shoulder and give him greater range of motion.

The key to success

Noel credits the assistance of physical therapist Stephen Polley — and his own drive — for his successful recovery.

“He made me work toward my limits and get well, because he saw how enthusiastic I was about returning to work and doing some of the things I enjoy,” he says. In addition to the physical therapy he received at FirstPark, Noel also diligently worked on strengthening and range-of-motion exercises at home.

“My shoulder feels really good, but if I misbehave, I feel it,” he says with a smile, noting that such “misbehavior” included a recent effort to move a large, cumbersome television set with his son.

“I didn’t hurt myself, but I could feel that it was quite a strain,” he says. “Sometimes I get rambunctious and think I can do things the way I’ve always done them, but then I’m reminded that the surgery I had was quite extensive.”

Comprehensive services

The orthopedic and rehabilitation services Noel received are part of a comprehensive services offered at MaineGeneral sites throughout the Kennebec Valley that are designed to return individuals to the quality of life they enjoyed before their injuries.

Care includes specialized hand and wrist surgery, sports medicine, major joint replacement, spine surgery, athletic training and physical and occupational therapy. A skilled and experienced team of orthopedic physicians works closely with specialized rehabilitation physicians and a full team of therapists and other health care professionals.

With treatment sites located throughout the greater Kennebec Valley, access to diagnostics, treatment, surgery and rehabilitation services is always convenient. □

For more information, visit www.mainegeneral.org/orthopedics or www.mainegeneral.org/rehabilitation.

MAINEGENERAL ORTHOPEDIC SURGEONS

Robert Day, MD

Medical degree: Tufts University School of Medicine

Residency: University of Utah Medical Center

Board certification: American Board of Orthopaedic Surgery

Marc Golden, DO

Medical degree: University of Medicine and Dentistry of New Jersey

Residency: Metropolitan Hospital, Philadelphia

Board certification: American Osteopathic Board of Orthopedic Surgery

Bruce Gomberg, MD

Medical degree: University of Pittsburgh

Residency: West Virginia University

Board certification: American Board of Orthopaedic Surgery

H. Winston Kipp, MD

Medical degree: State University of New York Health Science Center at Brooklyn

Residency: University of Pittsburgh Medical Center

Board certification: American Board of Orthopaedic Surgery

Anthony Mancini, MD

Medical degree: University of Vermont

Residency: University of Massachusetts Medical Center

Fellowship: Sports medicine, New England Baptist Hospital, Boston

Board certification: American Board of Orthopaedic Surgery

Catherine Meikle, MD

Medical degree: Cornell University Medical College

Residency: Tufts University New England Medical Center

Board certification: American Board of Orthopaedic Surgery

Jose Ramirez, MD

Medical degree: Ohio State University

Residency: Ohio State University

Board certification: American Board of Orthopaedic Surgery

William Rogers, MD

Medical degree: Dartmouth Medical School

Residency: University of Pittsburgh

Fellowship: Hand surgery, Grand Rapids, MI, and Hartford, CT

Board certification: American Board of Orthopaedic Surgery

John Thaller, MD

Medical degree: Jefferson Medical College

Residency: University of Virginia

Fellowship: Hand surgery, Philadelphia Hand Center

Board eligibility: American Board of Orthopaedic Surgery

David Urquia, MD

Medical degree: University of Virginia

Residency: Duke University Medical Center

Board certification: American Board of Orthopaedic Surgery



COMMUNITY NOTES

DOCTORS, EMPLOYEES AND BOARD MEMBERS

“Every physician in the United States knows that the landmark journal is The New England Journal of Medicine....

This is a tremendous recognition of Greg’s expertise and work in the field.”

– Steven Diaz,
Vice President
of Medical
Administration

W. Gregory Feero, MD, PhD, a MaineGeneral family physician and genetics specialist, has co-authored the lead article in a series on genetics and genomics for the prestigious *The New England Journal of Medicine*, which he also will coedit.

Feero practices at Maine-Dartmouth Family Medicine in Fairfield and also serves as a special advisor to the director of the National Human Genome Research Institute in Bethesda, MD.

MaineGeneral Vice President of Medical Administration **Steven Diaz, MD**, says he couldn’t recall a MaineGeneral physician ever being published in *The New England Journal of Medicine*.



Gregory Feero, MD, PhD, co-authored an article in *The New England Journal of Medicine* on genetics and genomics.

“Every physician in the United States knows that the landmark journal is *The New England Journal of Medicine*,” he says. “It is the top journal

for peer-reviewed, unbiased and appropriate medical information, so this is a tremendous recognition of Greg’s expertise and work in the field.” □

Steven Diaz, MD, MaineGeneral’s vice president of Medical Administration and **Barbara Woodlee, EdD**, former MaineGeneral Health chairwoman, recently received the Governor’s Award for exceptional contributions to the Emergency Medical Services (EMS) system at the state, national or system level.

Diaz, who has been the Maine EMS medical director for six years, was cited for his role in establishing cooperative relationships and commitment to improving patient care through educating providers.

Woodlee, who served as president of Kennebec Valley Community College (KVCC) from 1984 until July 2010, established the first full-time paramedic program at KVCC and was a founding member of the Kennebec Valley EMS Council. □

MaineGeneral was named Healthy Workplace – Large Business Category, which recognized communities, worksites, schools and individuals for their role in supporting a healthy Maine

through physical fitness and activity programs. MaineGeneral received the award in recognition of the variety of wellness programs as well as for their positive outcomes. □

The Maine Health Access Foundation (MeHAF) recently recognized MaineGeneral’s CarePartners staff for their commitment to improving the health of Maine residents.

The program is headed by supervisor **Jan Murton** and is staffed by care managers, intake staff and pharmacy technicians who help individuals access free and low-cost health care services and medications.

MeHAF cited staff “who helped MeHAF develop its first learning collaborative, so that organizations could build on each other’s success and learn from each other’s challenges to maximize their collective impact over the years.” □

John Benziger, MD, pathologist and laboratory director at MaineGeneral Medical Center, received a \$15,000 humanitarian grant from the College of American Pathologists Foundation to expand the availability of timely pathology services into rural areas across Nicaragua. □

IN THE REGION

Work is under way at the former Rite Aid Pharmacy at the intersection of College Avenue and Main Street in Waterville. Scheduled to open early next year, the space will house a MaineGeneral family medicine practice and lab services. Kennebec Family Practice, which will move into the space late this year, will be renamed Elmwood Primary Care to honor the Elmwood Hotel, an icon of Waterville's history that stood on that site for more than 100 years.

Two new physicians, Gina Hoang, MD, and Timothy Nuce, MD, are accepting new patients. Family nurse practitioners Susan Abbot and Donna Bilodeau are also accepting new patients.

The move is "part of our continuing commitment to Waterville and to expanding primary care in this community," says Scott Bullock, president and chief executive officer of MaineGeneral Health. □



A MaineGeneral family medicine practice will be located at the site of the former Elmwood Hotel in Waterville, shown here in a historical illustration.

Maine School Administrative District 49 recognized MaineGeneral Medical Center and staff for their leadership role in the 2009 school vaccination program.

The school district board of directors, which serves Albion, Benton, Clinton and Fairfield, presented Steven Diaz, MD, vice president of Medical Administration, with a community award. The recognition noted MaineGeneral's "commitment and dedication to youth welfare, achievement and education." □

Gearing up to protect students in this year's flu season, MaineGeneral's Prevention Center is partnering with



Delta Ambulance to provide vaccination clinics in 55 area schools, beginning in October and running through November. For more information about when these clinics are scheduled, please call Alison Jones Webb, MaineGeneral Prevention Center, **861-5273** or call your school nurse. □

QUALITY MATTERS

MaineGeneral's Harold Alfond Center for Cancer Care (HACCC) is one of the first 23



cancer practices in the United States to be recognized by the American

Society of Clinical Oncology's Quality Oncology Practice Initiative (QOPI) certification program.

Andrew Hertler, MD, the center's medical director, said the certification recognizes oncology practices that meet rigorous standards for quality

cancer care. The cancer center is the only program in Maine currently QOPI-certified and is one of only three in New England. □

The Imaging Department at MaineGeneral's Harold Alfond Center for Cancer Care has been awarded accreditation in positron emission tomography/computed tomography (PET/CT) by the American College of Radiology (ACR).

"ACR accreditation is a real quality indicator for our patients and our communities," says Denise Powell, manager of Imaging Services at the center. □

MaineGeneral was noted for its commitment to youth through its role in the 2009 school vaccination program. Clinics planned for 55 schools beginning in October.

COMMUNITY

Fall 2010

classes

Please note that these listings are subject to change.

For a full listing of available classes, please go to www.maine-general.org and click on "Community Calendar."

Cancer

For more information or to register for these presentations, call **626-4857** or e-mail donna.walsh@maine-general.org.

Augusta: Tuesday, Oct. 19, 6 to 8 p.m. Prescott Room, Harold Alfond Center for Cancer Care. Registered dietitian Donna Walsh will discuss nutrition for cancer survivors.

Augusta: Monday, Nov. 15, 6 to 8 p.m. Prescott Room, Harold Alfond Center for Cancer Care. Debbie Violette, a 12-year lung cancer survivor, will present cancer advocacy.

Diabetes Education

Day, evening and individual classes are available. A physician referral is required. Call **621-9320**.

Diabetes Roundtables

To confirm dates and topics, please call **621-9320**.

Hallowell: Monday, Nov. 8, 6:30 to 7:30 p.m., Granite Hill Estates. Dmitry Opolinsky, DO, from MaineGeneral's kidney care program, will present diabetic kidney disease.

Thayer Campus: Monday, Oct. 11, 6:30 to 7:30 p.m., Dean 3 and 4. Lisa Sauer, MD, from MaineGeneral's wound healing clinic, will present diabetic foot and wound care.

Diet/Nutrition Education

Help for managing chronic conditions as well as weight. A physician referral is required. Call **621-9320**.

Red Cross Blood Drive

Appointments are available every 15 minutes, and an ID is required.

Augusta Campus: Friday, Dec. 3, 10 a.m. to 4 p.m., Conference Rooms 4, 5 and 6. To schedule an appointment, call **621-9377**.

Thayer Campus: Friday, Nov. 12, 10 a.m. to 3 p.m., Dean 3 and 4. To schedule an appointment, call **872-1543**.

Maternity/Parenting

To register for any of the following classes, call **877-BABY (877-2229)** or toll-free **877-866-1535**. These classes are covered by MaineCare.

Breastfeeding Basics

Augusta Campus: Tuesday, Oct. 12, Wednesday, Nov. 10, and Thursday, Dec. 16, 6 to 8 p.m., Conference Rooms 4 and 5. \$20

Thayer Campus: Wednesday, Oct. 6, 6 to 8 p.m., Dean Auditorium. \$20

Prepared Childbirth Series

Augusta Campus: Thursdays, Oct. 21 to Dec. 16, 6 to 8 p.m., Conference Rooms 4, 5, and 6. \$125 per couple



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Thayer Campus: Wednesdays, Oct. 6 to Dec. 1., 6 to 8 p.m., Dean Auditorium. \$125 per couple

Prepared Childbirth Weekend Workshop

Thayer Campus: Saturdays, Oct. 23 and Nov. 20, 9 a.m. to 5 p.m., Dean Auditorium. \$90 per couple

Refresher Lamaze

Thayer Campus: Monday, Nov. 29, 6 to 8 p.m., Dean Auditorium. \$50 per couple

Sibling Class

Augusta Campus: Monday, Nov. 1, 6 to 7 p.m., Conference Room 1. Free

Thayer Campus: Wednesday, Oct. 6, 6 to 7 p.m., Dean 3. Free

Super Sitter Babysitting Program

Waterville Campus: Saturday, Nov. 6, 9 a.m. to 2 p.m., Dean 3 and 4. \$50

Smoking Cessation

Free ongoing support to quit smoking is available from a MaineGeneral Health educator in Waterville and Augusta. For more information, call **861-5275** or **621-3741**.

Weight-Loss Surgery Seminar

Huy Trieu, MD, will discuss Lap-Band® and gastric bypass surgeries. Registration is required. Call **800-971-8150** or **626-1078**.

Augusta: Thursdays, Oct. 28 and Dec. 16, 6 p.m., Senator Inn. Free

Waterville: Thursday, Nov. 18, 6 p.m., Holiday Inn. Free

Coming in November

FLU VACCINATION CLINICS

MaineGeneral Health will host its annual fall community flu vaccination clinics throughout November. Look for our ads in the Thursday *Kennebec Journal* and *Morning Sentinel*, or visit our website at www.maine-general.org.



Where you can find MaineGeneral Medical Center

6 East Chestnut Street Augusta, ME 04330 626-1000	149 North Street Waterville, ME 04901 872-1000	30 Chase Avenue Waterville, ME 04901 872-1000
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www.maine-general.org