

Steward

Health Matters

A publication of Steward Health Care for Residents of MetroSouth and the greater Taunton area from Good Samaritan Medical Center, Morton Hospital and New England Sinai Hospital.



Special Women's Health Edition

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From Our Family to Yours: The Good Samaritan Medical Birthing Center



The obstetrical services program at Good Samaritan's Birthing Center offers personalized and individualized care for women and their families.

Our Family Preference Plan lets you customize your labor, pain control, visitors, religious, cultural and educational needs during your labor and delivery experience.



Boston Children's Physicians
Until every child is well™

Good Samaritan Medical Center's Birthing Center team is here for one reason: to help you and your family through the wondrous celebration of life – the birth of your baby. We realize this is a very special time, full of excitement, questions and maybe a little anxiety. Our family is committed to helping your family throughout the entire experience, from pregnancy through delivery and even into the first year. At Good Samaritan, we recognize that our patient population is diverse with specific language and cultural preferences. We strive to ensure our hospital is

welcoming to individuals of all cultures and pledge to ensure that you have access to interpreter services 24 hours a day, if needed.

Private Rooms

We know that one of the best ways for you to relax and make yourself at home is with a private room. At Good Samaritan Medical Center, you stay in the same comfortable, private room during labor, delivery and recovery (LDR). Every LDR room at our Birthing Center has a bath with shower. Sleeper chairs are ready for your

partner or a support person to stay with you. Throughout your stay we encourage "rooming in" with your new baby to allow for private moments with you, your family and your baby.

Level II Special Care Nursery Staffed 24 Hours a Day by Boston Children's Hospital Physicians

Parents from Brockton and surrounding communities, such as Easton, Stoughton and Bridgewater, are fortunate to have Boston Children's Hospital's neonatologists

Your Obstetrical Team

The obstetrical team at Good Samaritan Medical Center includes 8 OB/GYN, 6 certified nurse midwives and more than 60 Obstetric nurses who deliver about 1,000 babies each year. Our doctors pride themselves on doing everything possible to be present at each patient's birth. 90% of the babies born at Good Samaritan Medical Center are delivered by the mother's own doctor or midwife.

Call for Your Private Tour of Good Samaritan Medical Birthing Center: 508-427-3712

To view videos of our OB providers, visit www.goodsamaritanmedical.org/maternity



Gestational Diabetes

MORTON HOSPITAL: Q&A with Dan Tang, MD, PhD, Endocrinologist, and Maria de Vera, DO, OB/GYN

— the only U.S. News and World Report-ranked neonatologists in New England — caring for infants in Good Samaritan's Special Care Nursery.

In partnership with Boston Children's Hospital, premature infants and those born with complications linked to high-risk pregnancies, such as diabetes, are given sophisticated care in the hospital that allows families to stay close to home.

“Our primary focus is to help fragile infants and their families have a good start to their lives,” says Shah Hossain, M.D., Chief of Neonatology at Good Samaritan Medical Center in Brockton and Assistant in Medicine, Division of Newborn Medicine at Boston Children's Hospital.

The Special Care Nursery is staffed 24/7 and parents are welcomed to visit at any time. The staff treat and nourish premature infants and also work with parents on education so they are prepared to care for their little ones when they are ready to go home.

The Special Touches

Every mom should feel pampered and we know special touches make a difference. We offer an OB Advocate who will help you design a personalized care plan and will act as your “conciierge”, free parking, free Wi-Fi in your room, flexible hours for visitors and a complimentary “Elegant Meal for Two” which will be arranged after your delivery.



At Morton Hospital's First Impressions Maternity Center, we do everything possible to ensure that your childbirth experience is as comfortable as it is memorable. We also offer many resources to new and expecting moms, including lactation consulting, childbirth classes, unit tours and a breastfeeding support group. **Learn more about our Maternity services at steward.org/Morton.**

Q: WHAT IS GESTATIONAL DIABETES?

Dr. de Vera: Gestational diabetes is a condition in which a patient is found to have diabetes or carbohydrate intolerance during a pregnancy.

Q: HOW DO I KNOW IF I AM AT RISK FOR GESTATIONAL DIABETES?

Dr. Tang: Factors that increase your risk for gestational diabetes include:

- Family history of regular diabetes or gestational diabetes
- Gestational diabetes in a previous pregnancy
- Being overweight before pregnancy
- Certain races, including African American, Asian American, Hispanic or American Indian
- History of delivering a baby more than 9 pounds

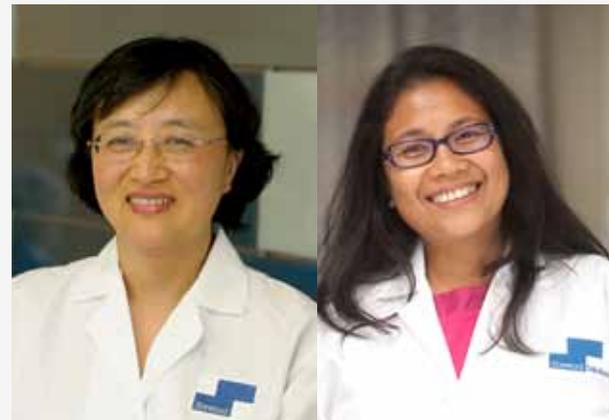
Q: ARE THERE ANY SPECIFIC NUTRITIONAL RECOMMENDATIONS FOR SOMEONE WITH GESTATIONAL DIABETES?

Dr. Tang: Food choices play a key role in managing gestational diabetes because of the importance of controlling blood glucose after meals. The following are some general dietary recommendations:

- Avoid high-calorie snacks and desserts (e.g., sugary beverages, candy, chips, cookies, cake).
- Use artificial sweeteners such as aspartame (NutraSweet®), sucralose (Splenda®), stevioside (Stevia®), or acesulfame potassium (Sunnet®). These sweeteners have not been linked to an increased risk of birth defects.
- Eat lots of vegetables and fruits. Some fruits (like grapes, dried fruit) can increase your blood sugar level excessively and should be eaten in limited amounts. Don't eat a lot of starchy vegetables (e.g., potatoes).
- Choose whole-wheat breads, rice and pasta instead of white.
- Choose lean meats and limit your intake of red meats to a few times during the week.
- Choose low-fat or fat-free dairy products.
- Use liquid oils (olive, canola) instead of solid fats (butter, margarine, shortening) for cooking.

Q: WHAT EFFECTS CAN GESTATIONAL DIABETES HAVE ON MY BABY?

Dr. de Vera: Gestational diabetes can increase the risk of having a very large baby. Once the baby is born, it may have problems with breathing, low glucose levels, and jaundice. Later on in life, the baby will be at higher risk for having diabetes.



Dan Tang, MD, PhD, Endocrinologist

Maria de Vera, DO, OB/GYN

Q: AFTER HAVING GESTATIONAL DIABETES, DO I HAVE RISK FOR DEVELOPING DIABETES IN THE FUTURE?

Dr. Tang: Yes. Although after pregnancy, gestational diabetes goes away in most women, 35-60 percent will eventually develop type 2 diabetes.

Q: IF I HAD GESTATIONAL DIABETES, IS MY CHILD ALSO AT RISK FOR BECOMING OBESE AND DEVELOPING TYPE 2 DIABETES? WHAT SHOULD I DO TO REDUCE THE RISK?

Dr. Tang: Yes. Both you and your baby have a lifetime risk of developing diabetes. Breastfeeding your baby is one way to protect your child from developing diabetes. It will also help you burn extra calories and perhaps lose weight. Tell your child's doctor that you had gestational diabetes. Ask for an eating plan to help your child grow properly and stay at a healthy weight.

Q: WHAT ARE YOUR LIFESTYLE RECOMMENDATIONS FOR A HEALTHY PREGNANCY?

Dr. de Vera: Optimize your health before getting pregnant. This involves going to your doctor on a regular basis for routine check-ups, screenings and necessary immunizations. You should inform your physician(s) about your plans of attempting pregnancy so that together you can address any medical issues you may have, as well as switch you to medications that are safe to take during pregnancy. It is important to start taking prenatal vitamins at least one month prior to conception to reduce the risk of major birth defects of the baby's brain and spine. As always, you should eat a healthy, well-balanced diet and exercise regularly. You should also avoid smoking, drinking alcohol, and certainly, using illicit drugs. Most of all, try to enjoy life. A happy mom makes for a happy baby!

Be Your Own Diabetic Chef

New England Sinai Hospital Shares Tips for Healthy Meal Preparation

As someone managing diabetes, you probably spend more time than the average person planning your daily menu. Processed foods may be plentiful and convenient, but for individuals with diabetes, they can be a health hazard since they are often loaded with fat and sugar.

What steps can you take to keep your meals interesting, healthy and convenient at the same time? Embrace your inner chef!

“You can find a lot of healthy recipes online and through our program,” said Patti LoPresti, RD, LDN, CDE, Diabetes Program coordinator and outpatient nutritionist at New England Sinai Hospital in Stoughton, Mass. “We can also help you develop an individualized meal plan that will keep you on track with managing your diabetes.”

Stock Your Pantry

The first step is to load up on some good healthy staples that can be used as substitutes or flavor enhancers. Add these items to your shopping list:

Artificial sweeteners. OK, this is a no-brainer for most people with diabetes. But try using a little sweetener in a new way. Instead of store-bought salad dressing, make this easy recipe at home. Whisk together two parts olive oil, one part balsamic vinegar, plus salt, pepper and sweetener to taste.

Low-sodium chicken or vegetable stock and cooking spray. Replace butter and oil in dishes where you would normally pan fry or sauté. The cooking spray helps prevent sticking and the stock adds a nice rich flavor, especially when reduced.

Sodium-free herbs and spices. Add flavor with herbs and spices, instead of using salt, sugar and fat. Try garlic powder, pepper flakes and lemon pepper to add a punch to savory dishes. Try reducing the sugar in recipes by half, and add a little vanilla, cinnamon or nutmeg to keep your desserts in balance.

Sugar-free applesauce. Replace half the butter or shortening called for in baked goods with applesauce to cut the fat and add fiber and vitamins. It's also a nice alternative to syrup.

Whole grain products. Whole grains offer more fiber, B vitamins and minerals than their white, processed counterparts. These nutrients can help with weight loss and reduce the risk of coronary artery disease.

Ditch the Fryer, Not the Flavor

So you've made a few healthy additions to your pantry, now what? Instead of frying food in loads of oil, grab your healthy seasonings and give these cooking techniques a try.

Braise. Brown the exterior of meat in a tablespoon or two of oil, then finish cooking with a small amount of water or stock, then cover the pot to finish cooking.

Grill or broil. In both cases, you reduce fat intake because the meat rests on a grill or grate, so fat can drip away.

Stir fry. Cook small pieces of protein and veggies fast with little oil and on high heat.

Steam. Steamers come in stove-top, microwave and electric varieties. Food rests in a perforated basket over steaming liquid (stock works great here) – no fat required.

Need a Food Coach?

Obtain a referral from your doctor to schedule an appointment with a dietitian at your Steward hospital. After you have a referral, visit the Steward DoctorFinder™ or call 1-800-488-5959.



Patti LoPresti, RD, LDN, CDE, diabetes program coordinator and outpatient nutritionist at New England Sinai Hospital demonstrates calorie equivalent of the average fast food meal to a plate of 25 oreo cookies!

Diabetes, Obesity and Bariatric Surgery

Francis' Story - Living With Type 2 Diabetes

Francis Bynoe, 56, a resident of Brockton, was diagnosed with Type II diabetes 25 years ago.

Like many people, she was not even aware she had diabetes until she started developing complications. At the beginning, Bynoe was in denial about her diagnosis and it was difficult for her to follow the advice on diet and nutrition from her medical specialists.

"All of the things they were telling me I couldn't eat were the things I grew up with," Bynoe says.

At New England Sinai Hospital in Stoughton, she has been treated by Dr. Howard Fogel, MD, Internal Medicine and Endocrinology for over a year. Both he and her care team have helped Bynoe manage her diabetes and find alternatives to some of her favorite foods while being sensitive to her food preferences and traditions. "The food size portions are very important," she mentions with a smile.

According to the American Diabetes Association, compared to the general population, African Americans are disproportionately affected by diabetes:

- 4.9 million, or 18.7 percent of all African Americans aged 20 years or older have diabetes.
- African Americans are 1.8 times more likely to have diabetes than non Hispanic whites.

Bynoe had gastric bypass surgery in September and is gradually reducing her insulin intake as she loses weight. She said she considers diabetes to be a "silent killer" because patients do not feel the pain of the disease every day. "Eventually it's going to kill you if you don't take control of it -- if you don't get some kind of help," Bynoe says.

Dr. Howard Fogel, MD, Internal Medicine and Endocrinology at New England Sinai, said that getting diabetic patients to take control of their disease and make commitments to eating healthier and exercising will help the community over time -- both improving patients' lives and reducing medical costs.



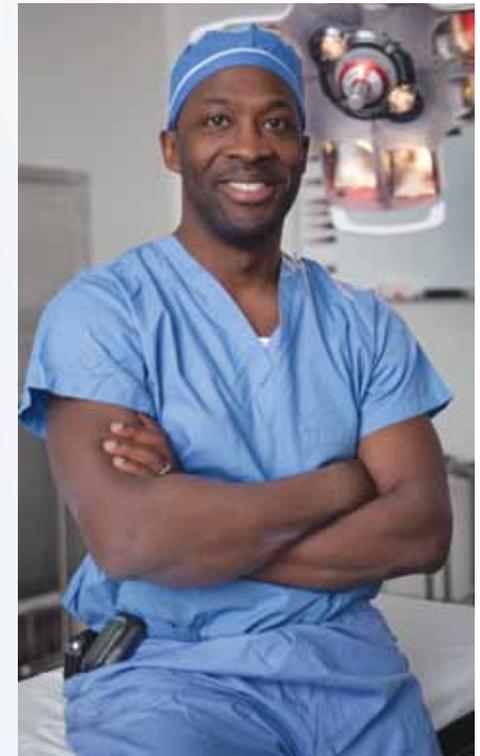
The Diabetes Center at New England Sinai Hospital

Sinai's Diabetes Center is a comprehensive program to keep diabetes under control to improve quality of life. Recognized by the American Diabetes Association for excellence in patient education, the Diabetes Center with its multidisciplinary staff offers medical management, diabetes self-management training, nutritional counseling and support groups.

To make an appointment at the Diabetes Center, please call 781-297-1500.

Many studies have confirmed the link between obesity and diabetes. When a person is unable to reduce weight and control their diabetes with diet and exercise, surgery can be a life-saving option.

According to Dr. Anthony McCluney, medical director for the Center for Weight Control at Good Samaritan, "Diabetes compounded by obesity can have devastating long-term consequences and our role is to help patients who cannot lose weight with traditional programs." The weight loss center has a team of surgeons, dieticians and psychologists with expertise in gastric bypass and other minimally invasive procedures.



Anthony McCluney, MD, medical director for the Center for Weight Control at Good Samaritan

"With weight-loss surgery, you can improve or resolve diabetes," says McCluney. "For potential patients in the greater Brockton area, our program is ideal. All of the office visits before and after surgery occur right on the Good Samaritan campus and the surgery is performed at St. Elizabeth's Medical Center in Brighton, an accredited Level 1 Bariatric Center by the American College of Surgeons."

How Do you Know If You Qualify for Weight Loss Surgery?

Body Mass Index (BMI) rather than, weight is used to determine whether or not an individual qualifies for bariatric surgery. BMI is a measure of obesity based on your height and weight that applies to both adult men and women.

If your BMI is greater than or equal to 40 you qualify for weight loss surgery regardless of being diagnosed with any weight related illnesses. Patients with a BMI equal to or greater than 35 also qualify for the surgery if they experience weight related illnesses.

According to Dr. McCluney, several studies have confirmed that weight loss surgery can improve quality of life and add years to a patient's life.

To get more information or attend a FREE webinar on-line, visit:
www.steward.org/Weight-Loss-Centers

Breast Cancer – The Disease You Can Defeat

Charu Taneja, MD, Brings a New Level of Breast Care to Morton Hospital and Encourages Women to be Proactive About Their Breast Health



Though breast cancer isn't the leading cause of cancer death among women (lung cancer is first), the startling fact is that American women face a one-in-eight chance of developing the disease over the course of their lifetime.

But other facts are important, too. Researchers have made giant strides in understanding breast cancer and how it can be detected and defeated. And they are even shedding light on preventive strategies. While still a serious problem, the truth is that breast cancer is almost always curable if it's discovered and treated in time.

Morton Hospital recently welcomed Charu Taneja, MD, surgical oncologist. Dr. Taneja brings years of experience in treating breast cancer and other diseases of the breast to the greater Taunton community. A fellowship-trained breast surgeon, Dr. Taneja is dedicated to treating women close to home. "It is always better for women when they can receive all of their care locally, in the community where they live and have a lot of support," says Dr. Taneja. "At Morton Hospital, we have a multi-specialty team of providers in place to provide women with comprehensive, high quality breast care."

Dr. Taneja and members of the Morton Hospital breast care team also work collaboratively with radiation

oncologists at Good Samaritan Medical Center in Brockton, as well as specialists at St. Elizabeth's Medical Center and the Dana Farber Cancer Institute in Boston.

According to Dr. Taneja, early detection is key to successfully treating breast cancer and breast diseases. "Typically, a breast cancer can be picked up through a mammography screening approximately two years before a woman will even feel a lump in the breast," says Dr. Taneja. "As a result of enhanced awareness and the increased use of mammograms, more and more early breast cancers are being diagnosed, when the disease is still very curable."

Dr. Taneja also reminds women that family history is not their only breast cancer risk factor. Other risk factors include a personal history of atypical cells in the breasts on previous biopsy and the use of hormone replacement therapy.

Regarding lifestyle modifications to help reduce your risk of developing breast cancer, Dr. Taneja recommends maintaining a healthy weight and avoiding smoking. "Most importantly, women should be proactive about their breast health," says Dr. Taneja. "In addition to



"As a result of enhanced awareness and the increased use of mammograms, more and more early breast cancers are being diagnosed, when the disease is still very curable."

Charu Taneja, MD,
surgical oncologist,
Morton Hospital

receiving annual mammograms, women should perform self breast exams and not hesitate to contact their provider if they feel or see any changes in their breasts."



Morton Hospital and Good Samaritan Medical Center offer digital mammography in 3 locations:

Morton Hospital's Women's Imaging Center
72 Washington Street (Thayer Building)
Taunton, Massachusetts 02780

Morton Health Services
Southeast Medical Center
511 West Grove Street
Middleboro, Massachusetts 02346
Walk-ins welcomed.

**Good Samaritan Medical Center
Women's Imaging Center**
The Goddard Center
909 Sumner Street, 2nd Floor
Stoughton, MA 02072

To schedule an appointment at one of Morton Hospital's Imaging Centers, please call 508-828-7690.

To schedule an appointment at Good Samaritan Medical Center's Imaging Center, please call 508-427-2665.

Cancer Treatment and Support

Good Samaritan Medical Center Brings All Services Together For You

Learning you have cancer can be overwhelming. Once you've made it past the initial shock, a thousand questions may come to mind. What do I have to do to get rid of the cancer? How will I pay for it? How will I work? How will my loved ones cope? Current, accurate information can ease your mind and bring you hope. To avoid becoming confused by opinions and options, you need to find accurate information you can trust.

Step one: Find a doctor you want to work with and Communicate.

For many women diagnosed with breast cancer, Dr. Richard Paulson, Chief of Surgery at Good Samaritan Medical Center, is the first name that comes to mind. Dr. Paulson has treated both women and men with breast cancer and non cancer problems over the past 28 years with a combination of great skill and great compassion.

"Dr. Paulson is highly respected among his colleagues and he is a great example of how communication can make a difference," says Eric Wojcik, Director of Oncology at Good Samaritan Medical Center. "He consults on a regular basis with physicians in other disciplines such as Pathology, Radiology, Hematology, Radiation Oncology and Primary Care to ensure every individual patient receives top-notch medical attention in a seamless and caring manner."

Regardless of the type of cancer you may be presented with, write out a list of questions. Bring a friend or loved one who can help you remember the doctor's advice. If you don't understand the doctor's answers, which may include terminology you're unfamiliar with, ask him or her to tell you in words you can understand.

Known for giving his personal cell phone number to his patients if they ever have a question or concern, Dr. Paulson's commitment and high ethical and clinical standards make him a sought-after surgeon in the region. "Patients know they can trust Dr. Paulson and the recommendations he will provide," says Wojcik.

Step two: Build a Team of Experts.

Not every patient requires surgery. Some patients require multiple forms of treatment. The doctor who diagnosed your cancer may refer you to one or more oncologists, or cancer specialists such as a Radiation Oncologist.

"The Radiation Oncology Center at Good Samaritan Medical Center takes the team approach very seriously," says Dr. Jason Zauls, medical director of the facility. "We consider it our mission to help patients by combining outstanding physicians, highly trained therapists, the most advanced technology and a philosophy that addresses the needs of our patients and their families, not just the disease."

According to Dr. Zauls, "Radiation therapy often requires daily visits over a period of many weeks. We hear time and again from our patients that our convenient location and our supportive environment can help take the edge off by avoiding unnecessary trips to Boston or other facilities where the care is not so personal."

Step three: Ask About All Your Treatment Options.

Medical research and technology advances continue to provide more options for cancer treatment. One of these is Stereotactic Body Radiation Therapy (SBRT), which is now offered at Good Samaritan. SBRT is a radiation therapy approach which delivers high dose radiation to a target within the body, in either a single treatment session or up to approximately five treatment sessions. "This development is an asset for patients, referring physicians and the community," says Dr. Zauls whose past experience made it possible to bring SBRT to the Radiation Oncology

Center. "It means we are able to offer this specialized treatment close to home, making the process easier for patients and their families."

Step four: Get support and information.

This article began with a series of questions that can burden patients who are told about a cancer diagnosis. Good Samaritan has an "Oncology Nurse Navigator" to help demystify information and provide support and resources in a myriad of ways.

Jan Amorello, RN, BSN, OCN interacts with patients every day. Some of the areas she focuses on include:

- Guiding you through the diagnostic imaging process
- Coordinating care (and appointments) among various specialists
- Connecting you to additional services such as financial counseling, social work or community-based support
- Answering your questions and also helping your family with resources



Oncology Nurse Navigator, Jan Amorello (right), discusses treatment options with a patient in the Good Samaritan Radiation Oncology Center in Brockton, MA.

Menopause: What to Expect - and What You Can Do To Prepare

Menopause is often called the “change of life.” It’s the period of time when menstruation cycles gradually end because the ovaries stop producing the female hormones estrogen and progesterone. This process usually occurs naturally and brings many changes along with it. The good news is that menopause is not a disorder, and most women do not need treatment for it. Additionally, the more informed you are about what to expect with menopause, the better prepared you will be when this “change of life” comes your way.

To give you a more in depth look into what you can expect with the onset of menopause, we asked Julia Edelman, MD, FACOG, board-certified gynecologist and certified menopause practitioner at Morton Hospital, to break down some definitions, symptoms and common bodily changes that many women experience.



Julia Edelman, MD

“Some women have concerns about menopause, and others have concerns about aging,” says Dr. Edelman. “Some are concerned about both”. Menopause is a natural transition in life. In the 1900’s fewer women had to be concerned with menopause since the average

woman’s lifespan was about 45. Now, the average woman lives to age 84 and spends more than 30 years in postmenopause. Fortunately, there are many lifestyle changes, alternative remedies, and

Your Bone and Breast Health during Menopause

Most women experience some bone thinning beginning in perimenopause, and increasing in early postmenopause. The changes with bone thinning are silent. Also, the risk of breast cancer continues to rise slowly with age until a woman reaches her early eighties. Therefore, it is important for women in the perimenopausal and postmenopausal stages of their lives to also keep their bone and breast health in mind.

prescription medications to ease any symptoms that arise, and women can look forward to many productive years after postmenopause begins.”

For example, a woman with night sweats may find it helpful to put an ice pack under her pillow at night, and keep turning the pillow to keep the cool side under her face. Vaginal moisturizers or lubricants may help to ease symptoms of vaginal dryness or pain with intercourse. In addition, there are prescription medications that help with hot flashes and are not hormone-based. Also, low-dose hormones can help some women with these symptoms.

For additional questions about menopause, speak with your provider or browse further information provided by the resources listed below. **To find a women’s health specialist at Morton Hospital, call 800-488-5959.**

RESOURCES:

1. *Menopause Matters: Your Guide to a Long and Healthy Life*, Julia Schlam Edelman MD, FACOG, NCMP © Johns Hopkins University Press, 2009. First chapter available free online at www.JuliaEdelmanMD.com.
2. www.menopause.org. This is the website for the North American Menopause Society and has extensive resource sections for women and their providers.
3. www.acog.org. This website for women and their providers is constructed by the American College of Obstetricians and Gynecologists and has helpful information and resources.

	PERIMENOPAUSE	POSTMENOPAUSE
DEFINITIONS	Perimenopause is the 10-15 year period leading up to postmenopause. During this transition stage, a woman is still fertile and can conceive, even if her menstrual periods are erratic.	Postmenopause begins 12 consecutive months after the final menstrual period. Postmenopause signals the end of a woman’s ability to conceive.
COMMON SYMPTOMS	Eighty percent of women in perimenopause have hot flashes, and 80 percent of women have irregular menstrual bleeding. Some women experience both.	A postmenopausal woman should not experience any vaginal bleeding. If she does, she should see a gynecologist to learn more about the cause, since her body is no longer generating menstrual cycles to explain the bleeding.
BODILY CHANGES	Hot flashes or night sweats may begin in perimenopause and fade away on their own, or remain during postmenopause. Vaginal dryness may begin.	Like perimenopause, vaginal dryness or pain may also begin during postmenopause.
AGE WHEN SYMPTOMS BEGIN OCCURRING	Symptoms of perimenopause begin 10-15 years before the final menstrual period. The average age for a woman to have her final menstrual period is 51 years old.	The youngest women to naturally enter postmenopause are 40 years old, and the oldest are 58 years old.

da Vinci Robotic Surgery is Making a Difference in Women's Health Care



Soheil Hanjani, MD

Throughout the years there have been many advances made in women's health care treatments. As the chair of Obstetrics and Gynecology at Good Samaritan Medical Center in Brockton, and an Easton resident, Soheil Hanjani, MD is pleased to introduce one of the most advanced treatment options available for women today, namely robotic surgery technology.

Doctors at Good Samaritan Medical Center have been performing women's health surgery for over a year with the da Vinci Surgical System robot. As a community hospital this is a wonderful advancement and allows us to provide minimally invasive surgical treatment to many women who have benign gynecological conditions like uterine fibroids, heavy bleeding, endometriosis (where the uterine lining grows outside the uterus) and chronic pain. A wide variety of benign (non-cancerous) conditions can affect a woman's reproductive system. Most of

The da Vinci® technology allows your doctor to perform complex procedures through just a few tiny openings. As a result, you may be able to get back to life faster without the usual recovery following major surgery

these conditions affect the uterus which is the hollow, pear-shaped pelvic organ where a fertilized egg implants and a baby develops during pregnancy.

Women who experience severe symptoms associated with the above conditions can be treated with hysterectomy – the surgical removal of the uterus. An estimated one third of all US women have a hysterectomy by age 60. Fortunately, using state of the art technology, robotic assisted surgery with the da Vinci system requires only a few tiny incisions so patients can get back to life and work quicker. da Vinci Surgery enables surgeons to perform delicate gynecological procedures with superior vision, precision, dexterity and control.

Robotic assisted surgery offers many potential benefits over traditional open and laparoscopic gynecological surgery, including:

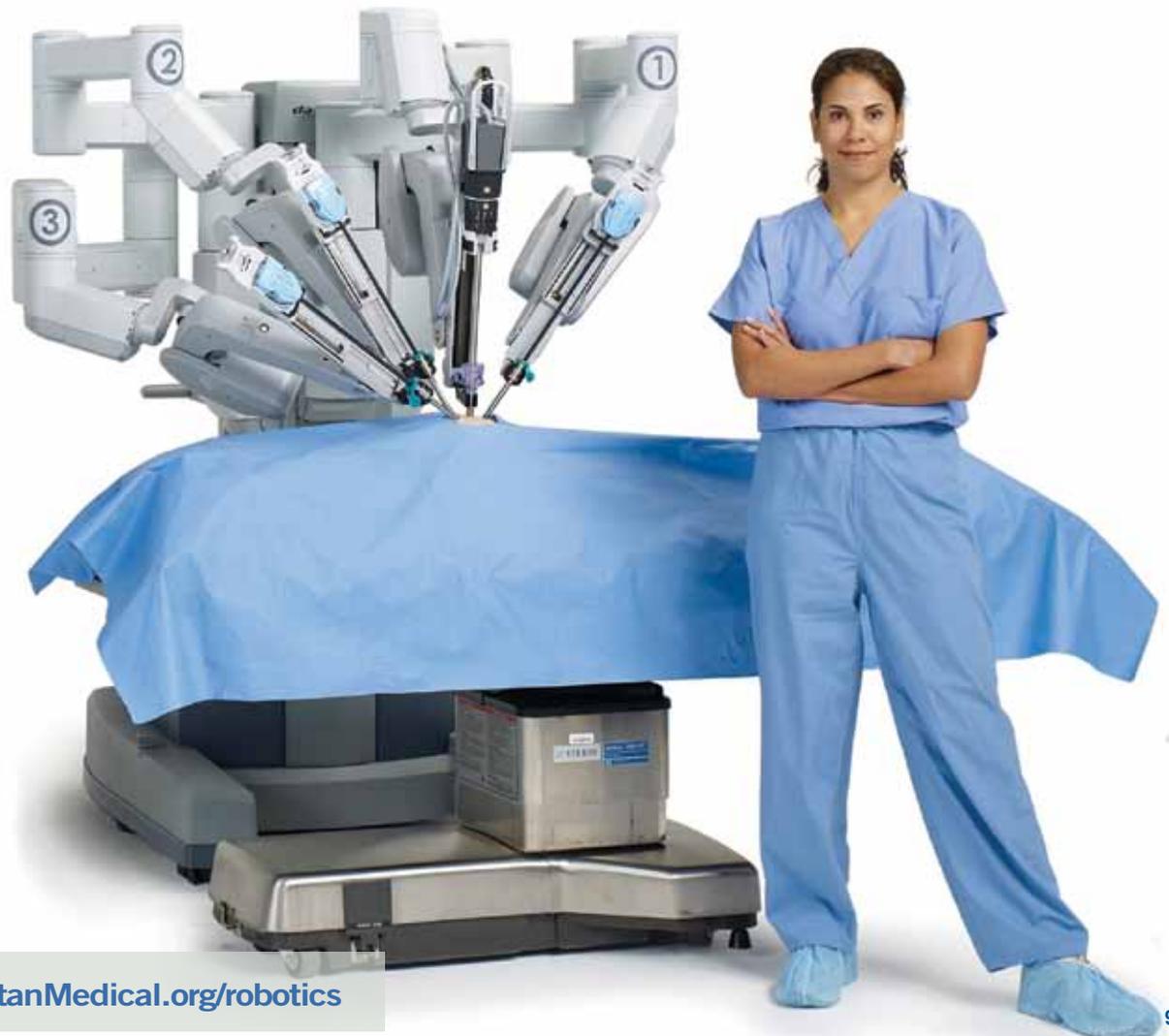
- Less blood loss
- Less pain
- Quicker recovery and return to normal activities

Though it is often called a 'robot,' da Vinci cannot act on its own. The surgery is performed entirely by your doctor. He or she controls the da Vinci System, which translates all hand movements into smaller, more precise movements of tiny instruments inside your body. The da Vinci® technology allows your doctor to perform complex procedures through just a few tiny openings. As a result, you may be able to get back to life faster without the usual recovery following major surgery.

The New Health Care is Here

Linda Carmo of Taunton was back to normal just one month after

da Vinci Surgery at Good Samaritan Medical Center. As a busy mom of three boys she did not have time for a long recovery following traditional hysterectomy to treat the severe symptoms she had associated with uterine fibroids.



To learn more, visit www.GoodSamaritanMedical.org/robotics

The New
Health Care
is Here

Steward Physicians Caring for Our Community

Angela N. Aslami, MD Obstetrics and Gynecology



Office Location:
Good Samaritan
Medical Office
Building
830 Oak Street, Suite
223E, Brockton
Telephone:
508-897-4765

**Areas of Special
Interest:**

Management of
Normal and High
Risk Pregnancies;
Adolescent and
Teen Gynecology;

Laparoscopic and Hysteroscopic Surgery

Affiliated with Good Samaritan Medical Center

Maria de Vera, DO - Obstetrics and Gynecology



Office Location:
Steward Medical
Group Women's
Health, 72
Washington
Street, Suite
1000, Taunton
Telephone:
508-824-2111

**Areas of Special
Interest:**

Laparoscopy

Affiliated with Morton Hospital

Howard Fogel, MD - Internal Medicine and Endocrinology



Office Location:
New England
Sinai Hospital,
Diabetes Center,
150 York St,
Stoughton
Telephone:
781-297-1385

**Areas of Special
Interest:** Diabetes
and Nutrition

Affiliated with New England Sinai Hospital

Laurie Curry, MD - Obstetrics and Gynecology



Office Location:
Steward Medical
Group Women's
Health, 72
Washington Street,
Suite 1000, Taunton
Telephone:
508-824-2111

**Areas of Special
Interest:** High-Risk
Obstetrics

Affiliated with Morton Hospital

Cindy Dodard, MD Obstetrics and Gynecology



Office Location:
Good Samaritan
Medical Office
Building
830 Oak Street,
Suite 223E,
Brockton
Telephone:
508-897-4712

**Areas of Special
Interest:**

Minimally
Invasive Surgery
(Laparoscopic);
Colposcopy;

In-Office Procedures; Vaginal Birth After
Cesarean Section

Affiliated with Good Samaritan Medical Center

Ann A. Glasman, MD - Primary Care/Internal Medicine



Office Location:
Steward Medical
Group Randolph
Internal Medicine,
999 North Main
Street, Randolph
Telephone:
781-961-1330

**Areas of Special
Interest:** Internal
Medicine; Primary
Care Medicine;
Women's Health

Affiliated with Good Samaritan Medical Center



Stewards of The New Health Care

Anthony L. McCluney, MD - Bariatric/ Weight Loss Surgery; General Surgery



Office Location:
Good Samaritan
Center for Weight
Control 830 Oak
Street, Suite 222E,
Brockton
Telephone:
508-427-3990
**Areas of Special
Interest:** Bariatric
Surgery; Gastric
Bypass Surgery;
Lap Band Surgery;
Hernia Repairs
- Ventral and

Inguinal; Laparoscopic Surgery

Affiliated with Good Samaritan Medical Center

Emilie A. Tack, DO - Obstetrics and Gynecology

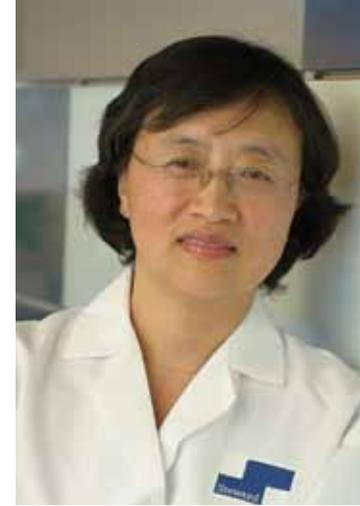


Office Location:
Steward Medical
Group, 21 Bristol
Drive, Suite 203,
South Easton
Telephone:
508-565-3411
**Areas of Special
Interest:**
Minimally
Invasive Surgery
(Laparoscopic);
In-Office
Procedures;
Osteopathic

Manipulative Medicine; General OB/GYN

Affiliated with Good Samaritan Medical Center

Dan Tang, MD, PhD - Diabetes, Endocrinology and Metabolism



Office Location:
Steward Medical
Group Specialty
Care Taunton, 100
Industrial Park
Road, Suite 2,
Taunton
Telephone:
508-822-2266
**Areas of Special
Interest:** Diabetes;
Osteoporosis;
Adrenal
Disorders;
Pituitary Disorders

Affiliated with Morton Hospital

Dima Quraini, MD - Cardiovascular Medicine



Office Location:
Steward
Medical Group
New England
Cardiology,
72 Washington
Street, Suite 1700,
Taunton
Telephone:
508-880-0077
**Areas of Special
Interest:** Women's
cardiac health;
Coronary artery
disease and

Valvular disease

Affiliated with Morton Hospital

Charu Taneja, MD - Breast Surgery and Surgical Oncology



Office Location:
Steward Medical
Group Women's
Health, 72
Washington
Street, Suite
1000, Taunton
Telephone:
508-824-2111
**Areas of Special
Interest:** Breast
Health; Breast
Cancer and
Benign Diseases
of the Breast

Affiliated with Morton Hospital

Raquel Volney, MD - Primary Care/Family Medicine



Office Location:
Steward Medical
Group Middleboro
Family Practice,
511 West Grove
Street, Suite 104
Middleboro
Telephone:
508-923-1913
**Areas of Special
Interest:**
Geriatrics;
Women's
Health; Diabetes
Management

Affiliated with Morton Hospital

All of the physicians are now accepting patients. Please call DoctorFinder™
at **1-800-488-5959** for more information and to schedule an appointment.

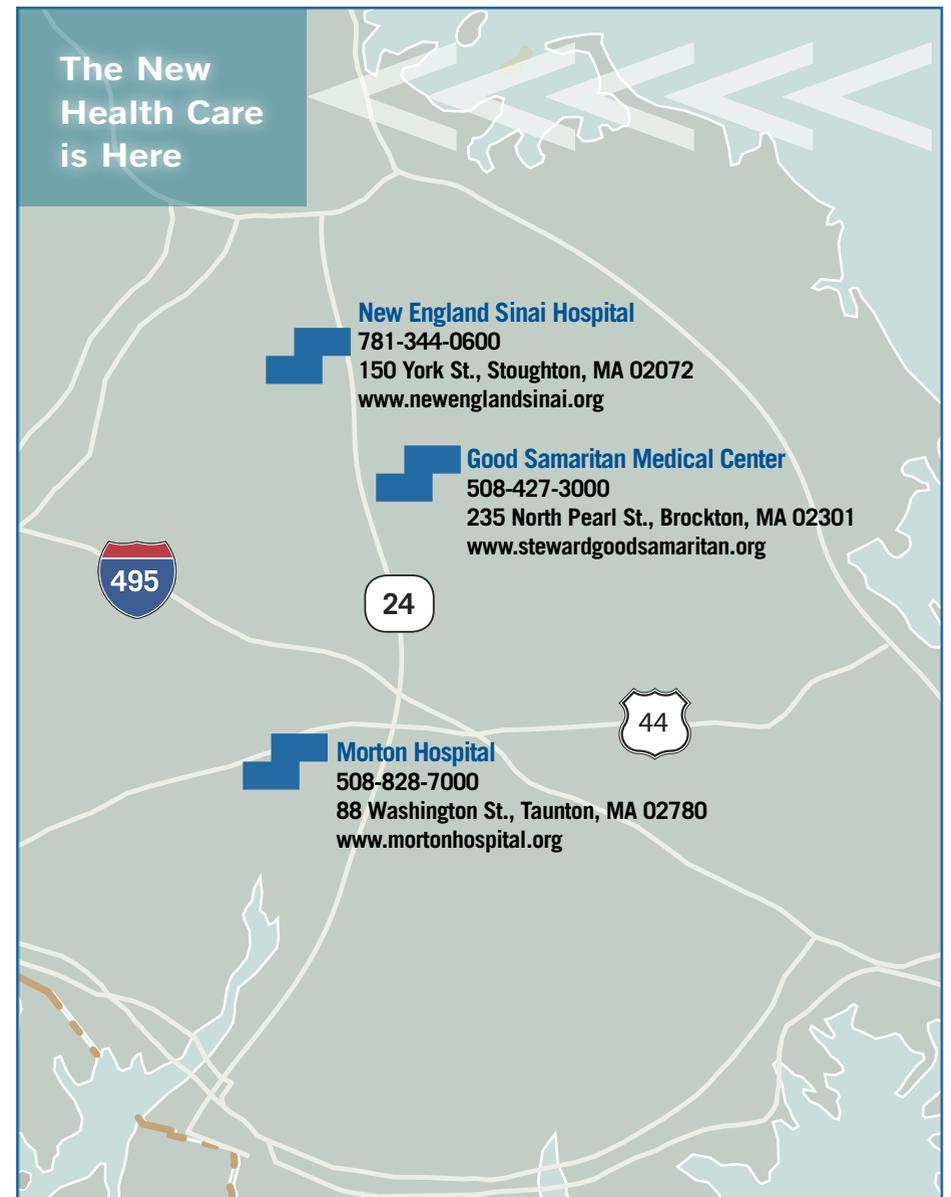
STEWARDS
DOCTORFINDER™



Addressing Health Care Disparities Through Cultural Competence

Many patients need to receive health care services in languages other than English. At Steward, we are dedicated to ensuring that all our patients can freely communicate with their health care providers at all times.

Steward has highly trained teams of medical interpreters available at each of our hospitals to facilitate communication between our providers and their Limited English Proficiency (LEP) patients. As a community-based accountable care organization, our interpreters are well versed in the top languages of the communities we serve and sensitive to their specific needs. We also provide access to trained medical interpreters via telephone and remote video interpretation to ensure that we can support more than 200 languages and dialects for both scheduled and unscheduled appointments 24 hours a day. Our technology includes support for American Sign Language when in-person interpreters are unavailable. Steward Health Care remains committed to the mission of providing a consistent standard of care for all patients in their preferred language(s) regardless of circumstance.



Health Recipe for Patients with Diabetes

Preparation time: 20 minutes

Serves 8

Serving size: 1 cup

Soulful Chili



- 2 tsp canola oil
- 2 medium onions, chopped
- 2 cloves garlic, minced
- 1 green bell pepper, seeded and chopped
- 1 ½ lb 96% extra-lean ground beef
- 2 ½ cups cooked kidney beans or 2 16-oz cans kidney beans, rinsed and drained
- 6oz tomato paste
- 1 tsp reduced-sodium beef bouillon powder or one cube
- 1 tbsp Worcestershire sauce
- 1 tsp dry mustard
- Red pepper flakes, to taste
- 3 Tbsp chili powder
- Salt to taste (optional)
- Pepper to taste (optional)
- 2 cups water

1. Heat the oil in a large soup pot and sauté the onion, garlic, and bell pepper for 5 minutes. Stir in the beef and cook until done.
2. Add the remaining ingredients, cover, and simmer for 20 minutes.

EXCHANGES

1 Starch | 2 Vegetable | 2 Lean Meat

Calories.....243
Calories from Fat.....59

Total Fat.....7 g
Saturated Fat.....2.1g

Cholesterol.....51mg

Sodium.....183 mg

Total Carbohydrate .24g

Dietary Fiber.....6g

Sugars.....5g

Protein.....23g

Source, "The New Soul Food Cookbook For People with Diabetes" by the American Diabetes Association