National Park Medical Center offers latest in diagnostic imaging technology

At National Park Medical Center, providing the latest healthcare technology to the Hot Springs area communities is a priority. Recently, the diagnostic imaging department at NPMC upgraded their records and filing system to a state-of-the-art PACS (picture archive communication system), designed to help manage large amounts of specialized imaging applications. “The new system allows for a more streamlined workflow, easier collaboration with clinics and physicians and productivity enhancements to help us better serve our patients,” said NPMC’s Director of Medical Imaging, Paulette Johnson. “With the efficiency that the PACS technology offers, our patients will see an even higher level of individualized care.”

“This implementation is a huge step forward for the Radiology Department,” said Radiologist William Davenport, MD, NPMC chief of radiology. “For those that interpret the studies done at NPMC, this system greatly increases interpretation efficiency. And, with increased efficiency comes more rapid report availability to ordering physicians, and faster results for the patients having their studies done at NPMC. Additionally, PACS connects the hospital’s radiology department to nearby and outlying physician offices, so that imaging review — no matter where in the NPMC network — is only a mouse-click away.” Physicians at NPMC are able to view their patients’ imaging tests remotely through a portal, allowing them access from their clinics without the wait time of traditional film.

Every imaging procedure at NPMC is now in a digitized format, and every piece of imaging equipment at NPMC, including Nuclear Medicine, Mammography, Computed Tomography (CT), Ultrasound, MRI, Angiogram/Angioplasty and the specials lab, is equipped for the digital format, making the imaging department a filmless environment.
CERVICAL CANCER and HPV

Cervical cancer is nearly 100 percent preventable and curable if it is detected early; in fact, the occurrence of deaths from cervical cancer has declined significantly over the last 20 to 30 years. Cervical cancer is almost always caused by human papillomavirus (HPV) infection.

- Human papillomaviruses (HPVs) are a group of more than 150 related viruses.
- The vaccines Gardasil® and Cervarix® are highly effective in preventing infection with certain types of HPV.

A preventable disease

“Cervical cancer rates are higher among older women; however, cervical intraepithelial neoplasia (CIN), the precursor lesion to cervical cancer, most often occurs among younger women,” says Dr. Brenda Powell, OB/GYN. “Screening younger women using the Pap test can actually prevent cervical cancer from developing almost 100% of the time.”

Various women's health organizations recommend routine screening for all women who are or have been sexually active and who have a cervix:

- Pap testing should begin at age 21 or 3 years after onset of sexual activity.
- Pap testing should be repeated at least every 3 years.
- Pap screening can be discontinued at age 70 for women with an intact cervix, who have had three consecutive satisfactory normal/negative pap tests, and have had no abnormal pap tests in the previous 10 years.

“There are exceptions to these guidelines, which may be made by your personal physician,” says Dr. Powell. “Please contact your physician for recommendations based on your personal health and history.”

Sources: cancer.gov and cdc.gov

HPV Vaccine – what parents and young women should know

HPV is a common virus that is passed from one person to another through direct skin-to-skin contact during sexual activity. Most sexually active people will get HPV at some time in their lives. HPV infection is most common in people in their late teens and early 20s. There are about 40 types of HPV that can infect the genital areas of men and women. Most HPV types cause no symptoms and go away on their own. But some types can cause cervical cancer in women.

Every year, about 12,000 women are diagnosed with cervical cancer and 4,000 women die from this disease in the U.S.

Who should receive HPV vaccination?

HPV vaccination is recommended for 11 and 12 year-old girls. It is also recommended for girls and women age 13 through 26 years of age; HPV vaccine can also be given to girls beginning at age 9 years.

Will sexually active females benefit from the vaccine?

Ideally, females should get the vaccine before they become sexually active. Females who are sexually active may also benefit from the vaccine. Few sexually active young women are infected with all HPV types prevented by the vaccines, so most young women could still get protection by getting vaccinated.
THERE’S NO BETTER TIME TO GET HEALTHY
FREE PREVENTIVE SERVICES

Under the Affordable Care Act, most insurance companies are required to cover certain preventive services at no cost to you. If you have a new health insurance plan or insurance policy beginning on or after September 23, 2010, the following are a few of the preventive services covered by your insurance company.

Covered Preventive Services for Adults
- Abdominal Aortic Aneurysm one-time screening for men of specified ages
- Blood Pressure screening for all adults
- Cholesterol screening for adults of certain ages or at higher risk
- Colorectal cancer screening for adults over 50
- Type 2 diabetes screening for adults with high blood pressure
- Diet counseling for adults at higher risk for chronic disease
- Immunization vaccines for adults

Covered Preventive Services for Women, Including Pregnant Women
Services marked with an asterisk must be covered with no cost-sharing in plan years starting on or after August 1, 2012.
- Anemia screening for pregnant women
- Bacteriuria urinary tract or other infection screening for pregnant women
- Breast cancer mammography screenings every 1 to 2 years for women over 40
- Breastfeeding comprehensive support and counseling, access to breastfeeding supplies*
- Cervical cancer screening for sexually active women
- Chlamydia Infection screening for younger women and others at higher risk
- Contraception – Food and Drug Administration-approved contraceptive methods, sterilization procedures, and patient education/counseling, not including abortifacient drugs*
- Domestic and interpersonal violence screening and counseling for all women*
- Folic acid supplements for women who may become pregnant
- Gestational diabetes screening for women 24 to 28 weeks pregnant and those at high risk of developing gestational diabetes*
- Hepatitis B screening for pregnant women at their first prenatal visit
- HIV screening and counseling for sexually active women*
- Human Papillomavirus (HPV) DNA Test: high risk HPV DNA testing every three years for women with normal cytology results who are 30 or older*
- Osteoporosis screening for women over age 60 depending on risk factors
- Rh Incompatibility screening for all pregnant women
- Sexually Transmitted Infections (STI) counseling for sexually active women*
- Well-woman visits to obtain recommended preventive services for women under 65*

For a complete list, including preventive services for children, contact your healthcare provider or go to healthcare.gov and click on Prevention and Wellness.

For a complete list of physicians and other healthcare providers, go to nationalparkmedical.com

LIVE LONG, LIVE STRONG

Under the Affordable Care Act, if you have Original Medicare, you can get a yearly wellness visit that gives you a chance to talk with your doctor to make sure you are getting the right prescriptions and care for free.

There are other important preventive benefits to help detect disease early. Preventing chronic disease improves health and quality of life and helps you live long and live strong. The services that qualify are listed below:

- **Yearly wellness exam.** If you are new to Medicare, your “Welcome to Medicare” physical exam is now covered during your first 12 months of Part B coverage.
- **Tobacco use cessation counseling.** This benefit is a covered preventive service, whether or not you have been diagnosed with an illness caused or complicated by tobacco use.
- **Screenings.** No Part B deductible or co-payment:
  - Bone mass measurement
  - Cervical cancer screening, including Pap tests and pelvic exams
  - Cholesterol and other cardiovascular screenings
  - Colorectal cancer screening
  - Diabetes screening
  - Flu shot, pneumonia shot, and the hepatitis B shot
  - HIV screening for those at increased risk or who ask for the test
  - Mammogram
  - Medical nutrition therapy to help manage diabetes or kidney disease
  - Prostate cancer screening

*For some preventive services, you will pay nothing.* You may have to pay co-insurance (a part of the cost) for the office visit when you get these services.
Arrhythmia

Arrhythmia is a change in the normal sequence of electrical impulses causing the heart to beat too fast, too slowly, or erratically. When the heart doesn’t beat properly, it can’t pump blood effectively. When the heart doesn’t pump blood effectively, the lungs, brain and all other organs can’t work properly and may shut down or be damaged.

Atrial fibrillation (also called AFib or AF) is a quivering or irregular heartbeat (arrhythmia) that can lead to stroke and other heart-related complications. Some people refer to AF as a quivering heart.

“Some patients say their heart is doing flip-flops, skips beats, or feels like it’s banging against the chest wall,” says Dr. Eric Bowen, interventional cardiologist. “Others complain of being nauseated, light-headed and weak. And others have no symptoms at all. AF is often discovered during a regular check-up.”

Normally, the heart contracts and relaxes to a regular beat. In atrial fibrillation, the upper chambers of the heart (the atria) beat irregularly (quiver) instead of beating effectively to move blood into the ventricles. About 15 to 20% of people who have strokes have this heart arrhythmia.

“It’s the most common heart rhythm abnormality in people over the age of 65,” says Dr. Bowen. “Untreated atrial fibrillation doubles the risk of heart-related deaths and causes a four to five-fold increased risk for stroke.”

Heart Failure

Heart failure sounds like the heart is no longer working. Actually, it means the heart isn’t pumping as well as it should.

“The heart pumps blood to the lungs and the body’s tissues by a sequence of highly organized contractions of its four chambers,” says Dr. Edward Taliaferro Warren, cardiovascular and thoracic surgeon.

“With heart failure, the heart muscle can’t pump enough blood to meet the body’s needs,” says Dr. Warren. “Basically, the heart can’t keep up with its workload.”

The heart tries to make up for this by:

- **Enlarging** – stretching and contracting more strongly to pump more blood.
- **Developing more muscle mass** – as the contracting cells of the heart get bigger, the heart pumps more strongly, at least initially.
- **Pumping faster** – in order to increase the heart’s output.

The body also tries to compensate:

- **The blood vessels narrow** to keep blood pressure up to try to make up for the heart’s loss of power.
- **The body diverts blood** away from less important tissues and organs.

“These temporary measures mask the problem of heart failure, but they don’t solve it,” says Dr. Warren. “Eventually the heart and body just can’t keep up, and the person experiences fatigue, breathing problems and impaired thinking.”
Peripheral Artery Disease
PAD is a narrowing of the peripheral arteries, most commonly in the arteries of the pelvis and legs. “PAD is similar to coronary artery disease and carotid artery disease,” says Dr. Jeffrey Tauth, interventional cardiologist. “All three of these conditions are caused by narrowed and blocked arteries in various critical regions of the body.

“PAD is usually caused by atherosclerosis in the peripheral arteries (or outer regions away from the heart),” says Dr. Tauth. “Plaque formations can grow large enough to significantly reduce blood flow. When a plaque formation becomes brittle or inflamed, it may rupture, triggering a blood clot to form. A clot may either further narrow the artery, or completely block it.”

If the blockage remains, it can cause pain, changes in skin color, sores or ulcers and difficulty walking.

The most common symptoms of PAD are cramping, pain or tiredness in the leg or hip muscles while walking or climbing stairs. Typically, this pain goes away with rest and returns when you walk again.

“People with peripheral arterial disease have four to five times more risk of heart attack or stroke,” says Dr. Tauth. “The more you understand, the more likely you’ll be able to help your healthcare professional make an early diagnosis and start treatment.”

Coronary Artery Disease
Coronary artery disease is a condition in which plaque builds up inside the arteries.

“Over time, the plaque hardens and narrows your arteries,” says Dr. Tauth. “This limits the flow of oxygen-rich blood to your heart muscle.

“Eventually, the plaque can rupture, causing a blood clot to form, which can block blood flow through a coronary artery.

“If the flow of oxygen-rich blood to your heart muscle is reduced or blocked, angina or a heart attack may occur.”

Angina may feel like pressure or squeezing in your chest. The pain also may occur in your shoulders, arms, neck, jaw, or back. It may even feel like indigestion.

“If blood flow isn’t restored quickly, the section of the heart muscle begins to die,” says Dr. Tauth. “Without quick treatment, a heart attack can lead to serious problems and even death.”

The average American gets about 3,400 mg of sodium a day — much more than the recommended 2,300 mg.

Source: www.nhlbi.nih.gov
You may have heard someone say he has “a touch of diabetes” or that her “sugar is a little high.” But diabetes is a serious disease. Untreated, diabetes can cause heart disease, peripheral artery disease (PAD), stroke, kidney disease, blindness, nerve disease and lead to amputation.

The good news is that diabetes is treatable. “Not all cases of diabetes need to be treated with insulin,” says Dr. Robert Parrott, family medicine physician. “Type 2 diabetes can often be successfully treated with diet, exercise and oral medication.”

“Individual nutrition counseling, based on a patient’s caloric needs, lifestyle and medication are available at National Park Medical Center,” says Laura Halpain, RD. “We can provide medical nutrition therapy for help in losing weight and maintaining a healthy lifestyle.”

“It sounds simple, but routine care can make all the difference,” says Dr. Parrott. “See your health care team every six months to have your blood pressure, feet and weight checked. We can also talk about your self-care plan and administer A1C test to see how you are managing your diabetes over time.

“Every year you should have a lipid profile test, a dental exam, a dilated eye exam, a flu shot and a urine and a blood test to check for kidney problems,” he says.

March 27 Is Diabetes Alert Day

Who should be tested? You should if you are:

- Overweight and over age 45
- Overweight, under age 45 and have one or more additional risk factors:
  - High blood pressure
  - High cholesterol
  - A family history of diabetes
  - African-American, Asian-American, Latino/Hispanic-American, Native American or Pacific Islander descent
  - Having diabetes during pregnancy or delivering a baby over 9 lbs.

If your blood glucose levels are in normal range, testing should be done about every three years. If you have prediabetes, you should be checked for diabetes every one to two years after diagnosis.
How Much Sleep Do We Really Need?

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Recommended Hours</th>
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</thead>
<tbody>
<tr>
<td>Newborns (0 to 2 months)</td>
<td>12 – 18 hours</td>
</tr>
<tr>
<td>Infants (3 to 11 months)</td>
<td>14 – 15 hours</td>
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<tr>
<td>Toddlers (1 to 3 yrs.)</td>
<td>13 – 14 hours</td>
</tr>
<tr>
<td>Preschooler (3 to 5 yrs.)</td>
<td>11 – 13 hours</td>
</tr>
<tr>
<td>School-age children (5 to 10 yrs.)</td>
<td>10 – 11 hours</td>
</tr>
<tr>
<td>Teens (10 to 17)</td>
<td>8.5 – 9.25 hours</td>
</tr>
<tr>
<td>Adults</td>
<td>7 – 9 hours</td>
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</table>

Source: sleepfoundation.org

"Most adults need seven to nine hours of sleep each night to feel well-rested, but may have trouble “turning off” his or her mind at the end of the day. For adolescents, it is hard to get the required nine hours of sleep when their bodies say ‘stay up late’ and school says ‘start early.’”

– Dr. Kaul

Tips to Improve Your Sleep

- Establish consistent sleep and wake schedules.
- Create a regular, relaxing bedtime routine – begin an hour or more before the time you expect to fall asleep.
- Create an environment that is dark, quiet, comfortable and cool.
- Sleep on a comfortable mattress and pillows.
- Keep “sleep stealers” out of the bedroom – avoid watching TV, using a computer or reading in bed.
- Finish eating at least two hours before your regular bedtime.
- Exercise regularly during the day or at least a few hours before bedtime.
- Avoid caffeine and alcohol products close to bedtime.
THE BREAST CENTER HAS A NEW HOME

The Breast Center at NPMC is now open at a new location to better serve mammography patients. All patients visiting NPMC for a mammogram will now report to the new, spa-like breast center located on the first floor of the Ouachita Professional Building, Suite 102, adjacent to National Park Medical Center.

“We are very excited about what this move will mean for our patients,” says mammographer Becky Norwood, RTR. “Not only will our patients have the convenience and privacy of a separate breast center, we will also have the safety and reassurance of having the full-service hospital right next door.” The center features the latest in digital mammography technology, computer aided detection equipment and the Multicare Platinum Prone Stereotactic Breast Biopsy System, making it the premier center for diagnostic breast care.

“We are looking forward to an even better patient experience, with a more streamlined sign-in process, a more accessible and easy-to-find location and more private locale for our patients,” said Norwood. The NPMC Breast Center will continue to feature spa-style robes for all patients, the latest in digital mammography technology, and experienced and compassionate staff. “The new location is very comfortable and features serene and calm décor including a beautiful fountain donated by the NPMC Auxiliary.”

“We are passionate in the fight against breast cancer, and we cherish the relationships we develop with our patients,” said Norwood. “We hope that a more relaxed, private location will encourage even more women to have their annual mammogram.”

To schedule a mammogram at NPMC, call 620-2360 or visit www.nationalparkmedical.com for more information.

Introducing

National Park Medical Center and the Orthopaedic Center of Hot Springs are pleased to welcome Orthopaedic Surgeon Dr. Trent Johnson to their staff. Dr. Johnson received his Bachelor of Science in chemical engineering from the University of Arkansas in Fayetteville. He received his medical degree from UAMS in Little Rock and completed an orthopedic surgery residency at the University of Kentucky in Lexington. Dr. Johnson performs joint replacement and reconstruction procedures and the full scope of general orthopedics procedures including foot and ankle treatments, hand treatments, treatment for sports injuries, trauma and fracture care and other disorders of the bones, joints and muscles.

For a complete listing of our medical staff, visit www.nationalparkmedical.com

Trent Johnson, MD
Orthopedic Surgeon