The Times They Are a-Changin’

By Judy Mehlman

In 1991, when Warren Green joined Sinai Hospital as president and CEO, Sinai was one of less than 10 remaining Jewish-sponsored hospitals in the United States (there had been more than 100), and faced daunting fiscal and operational challenges in an extremely competitive health care environment. Sinai employed approximately 2,400 people, had revenues of less than $200 million and was affiliated with 850 physicians. This coming June 30, when Warren retires as CEO of LifeBridge Health, the parent company of Sinai, Northwest Hospital, Levindale Hebrew Geriatric Center and Hospital, and Courtland Gardens Nursing and Rehabilitation Center, he will be leaving a healthcare powerhouse with $1.25 billion in revenues that employs more than 7,200 staff and is affiliated with more than 1,200 physicians.

And happily for the Sinai community, Neil Meltzer will be succeeding Warren as CEO at LifeBridge. Neil has been Sinai’s leader since 1998 (when Warren assumed the leadership of the newly created LifeBridge) and Warren’s partner in crafting this dynamic transformation.

During the Green/Meltzer tenure, LifeBridge Health and Sinai have become beacons of the Baltimore community and beyond. The Rubin Institute for Advanced Orthopedics at Sinai is a world class orthopedic institute boasting internationally renowned surgeons and state-of-the-art operating rooms and attracting patients from around the globe. The Sandra & Malcolm Berman Brain and Spine Institute, nationally recognized by US News and World Reports and the American Heart Association, the Krieger Eye Institute, at the forefront of ocular disease and research and, most recently, the Herman & Walter Samuelson Children’s Hospital at Sinai— all have been developed and cultivated under the dedicated leadership of Green and Meltzer.

LifeBridge Health has been recognized for three consecutive years as a Best Place to Work in the Greater Baltimore area, and LifeBridge Health has been added to the Fortune 100 list of Best Places to Work. In 2008, Sinai Hospital was awarded Magnet status, the highest distinction bestowed to an organization for its nursing culture.

The Sinai Board engaged in a national search to identify a new leader for our hospital. Impact is excited to introduce Amy Perry to our readers in a conversation that appears on page 3.
A Message from Neil Meltzer  
President and CEO Designate of LifeBridge Health

As I look forward into the future, I am optimistic. And that’s a good thing, given the field in which I work: healthcare.

Over the next decade, our industry will change dramatically. But LifeBridge Health is well-positioned to do more than adapt to these changes, we’ll embrace them. In doing so, we’ll fulfill our promise to the community: to provide high quality medical care to those who need it.

Our ability to deliver this care will depend upon the strength of our relationships with our representatives at both the state and local levels of government; with our neighbors and the communities we serve; and, most importantly, with our medical staff.

We have taken steps to bolster physician practices within the community so that patients have easier access to these doctors when and where they need them. For example, we have expanded the Rubin Institute for Advanced Orthopedics physician affiliation to include orthopedic surgeons in Northwest Hospital’s back yard. The Krieger Eye Institute also plans to open an office on North-west Hospital’s campus this year.

Following industry trends, as well as forecasts for the future of healthcare, we expect to see a boom in demand for inpatient neurosurgery services from a growing elderly population. In anticipation of this trend, we opened a 20-bed inpatient neurological rehabilitation center, located on the fifth floor of Sinai’s South Tower. This center provides specialized rehabilitation services to adults who have sustained a brain injury, stroke or other neurological disorder.

As I mentioned before, here at Sinai Hospital and throughout LifeBridge Health, we are excited about the future of our industry. Despite many who were dragged about the future of our industry, I, along with my colleagues and all LifeBridge Health employees, walk forward with courage and determination. We share a vision where all who need our very special and unique talents can and will receive them.

Through your continued support of Sinai Hospital, you share this vision with us. For that I am grateful. Thank you.

Sincerely,

Neil M. Meltzer  
CEO Designate  
LifeBridge Health

---

A Message from Joann Nagy  
Chair Sinai Auxiliary

I am pleased to have this opportunity to greet everyone and share with you the reasons for my enthusiasm for our wonderful organization. My introduction to our Auxiliary dates back 18 years when I participated in a mentoring program sponsored by the Associated Jewish Federation of Baltimore. Since then, I have learned what the Auxiliary’s relationship to Sinai truly means and the important contributions our organization makes both to the hospital and the surrounding community.

Much has changed with the passage of time. Hospitals and other healthcare providers operate very differently from the way they used to, and we’ve adapted to this changing world. We remain an integral and valued part of the Sinai family, and I’m proud to be able to describe some of our activities.

The hospital business is a difficult one, and there are never enough resources to fund even the most worthwhile opportunities. Auxiliary grants support important programs and enable the purchase of needed equipment. Each year our grant committee, chaired by long-serving board member Debbi Baer, selects from among many worthy projects that apply to us for funding.

Another central thread that weaves the Auxiliary into the fiber of the Hospital is the Auxiliary’s annual celebration of the cycle of Jewish holidays. From the autumn festival of Sukkot in the fall, to Chanukah in the winter to Purim in the spring, these holiday festivities reflect that there is great comfort in tradition, and Auxiliary volunteers are committed to sharing these traditions with our Sinai family. We also knit caps for each newborn born at the hospital, send therapeutic heart pillows to cardiac patients recuperating from by-pass surgery, donate Baby Closets for financially strapped new mothers and offer no charge classes to prepare siblings-in-waiting for the arrival of a new brother or sister.

An important way our Auxiliary generates the funds needed to support hospital programs and activities is through our vendor sales. Held year round for the benefit of Sinai employees and manned by a cadre of faithful Auxiliary members, the sales are a win-win opportunity for everyone. Revenue the Auxiliary earns is provided to Sinai for patient needs, grants, etc. I want to publicly thank Auxiliary Liaison Marcia Aaronson for all her hard work and effort in orchestrating the sales.

Each year the Auxiliary chair gets the opportunity to brag about the significant role we play in Sinai’s annual Race For Our Kids, originally the brainchild of then Auxiliary board member Scott Phin, whose daughter Peyton had been successfully treated at The Children’s Center at Sinai. Last September we were once again the lead sponsor of the Race. One thousand three hundred and thirteen participants and supporters raised a record $133,000 for the Department of Pediatric Oncology. Kudos to Diane Stoler, Beth Taub and Lisa Singer for their herculean efforts in making sure that the “Family Walk” portion of the race is always fun and creative for the race’s youngest participants.

The new Herman & Walter Samuelson’s Children’s Hospital has now been opened for a little more than a year and I am thrilled to report that the Auxiliary funded both a family room and treatment room and the outstanding sculpture that stands in its lobby. (Please see the article about the Children’s Hospital and the Auxiliary connection on p. 6)

Our mission as an Auxiliary has always been to help Sinai provide the highest level of medical care to its patients and to be an asset of irreplaceable value to the communities it serves. Today’s Auxiliary builds on the wonderful foundation established by the leaders and volunteers who came before us. My personal quest as chair of the Sinai Hospital Auxiliary is to ensure that we are worthy successors to these great women and men, and that we continue to fulfill our worthy mission.

Warmly,

Joann Nagy  
Chair, Sinai Hospital Auxiliary
Meet Sinai’s New President: A Conversation With Amy Perry

By Judy Mehlman

For the past 20 years, Amy Perry has been affiliated with Mount Sinai Medical Center in Miami Beach, Florida. Since 2002 she has been the hospital’s senior vice president and chief operating officer. Mount Sinai Medical Center is a 672 bed, not-for-profit teaching hospital with two campuses. As senior vice president and COO, Perry has been responsible for all inpatient and outpatient operations, strategic planning, marketing, government affairs, clinical services, facilities, property management, capital deployment and human resources.

Perry will succeed Neil Meltzer as president of Sinai Hospital and executive vice president of LifeBridge Health on July 1, 2013. She has been transitioning into her new role since March of this year, commuting each week to Baltimore from her home in Florida.

When we spoke, Perry had just returned to Florida from a busy week in Baltimore. Following are excerpts from our conversation.

Mehlman: Welcome to Baltimore! What are your early impressions of our city?

Perry: Although I haven’t had an opportunity yet to see much of Baltimore, I’m so impressed by the friendliness of everyone I’ve met. Everyone has been caring, warm and welcoming. There is a wonderful sense of family at Sinai, and there seems to be great pride in and affection for Sinai in the community.

Mehlman: You have been living in Miami Beach, Florida for a long time. What about Sinai Hospital convinced you to move from the Sunshine State?

Perry: I’m glad you asked that. I loved my job in Florida but I think Baltimore’s Sinai Hospital is a unique place. I’m impressed by Sinai’s long-standing mission of quality healthcare enhanced through teaching and research. Also, Sinai embodies what I see as a Jewish value of embracing diversity – in its patients, employees and the community it serves. The emphasis Sinai places on community outreach is terrific. I’m looking forward to growing our healthcare network with Sinai, Northwest Hospital and our physician partners.

Mehlman: How will your responsibilities here at Sinai be different from those you’ve had at Mount Sinai Medical Center?

Perry: My responsibilities as Sinai President will be quite similar, but I will also have the opportunity here to help Sinai and LifeBridge grow the system, to work with Neil Meltzer to develop the network so that we are ready to care for the population in the future healthcare environment. I hope during my tenure, we will build on Warren Green’s legacy and realize Neil’s vision for the future.

Mehlman: What challenges do you anticipate will be most difficult?

Perry: The transformational changes our nation’s healthcare system is undergoing now present critical cultural and educational challenges. Providers and consumers must be educated to understand not only the new rules but, most importantly, how the new and changing healthcare delivery paradigm impacts the way we provide care and the factors which our physicians and patients will focus on when seeking healthcare services. We need to take the lead in educating ourselves and all of the Sinai stakeholders.

Mehlman: Do you have some specific thoughts about how the changing healthcare landscape will affect Sinai?

Perry: It’s clear that Sinai, like all hospitals, will be required to report against newly developed measures of quality and cost performance, and that this reporting will be available to consumers, the government, insurance companies and others. This heightened public accounting requires an increased focus on performance. As consumers assume greater responsibility for the payment of services they receive and the selection of the provider to perform those services, we want to ensure that it is our healthcare system that they choose. We need to continue our dedication to putting our patients first and to providing medical care of the highest quality at the most efficient cost, and be prepared to demonstrate our leadership in these areas.

Mehlman: Does Miami’s Mount Sinai Medical Center also have an Auxiliary, and, if so, what role do they play?

Perry: Yes, Mount Sinai has a terrific group of about 400 volunteers who connect to the hospital in many ways, from reading to patients and manning desks, to taking carts around to patients’ rooms. Our Auxiliary is a subsection of our Volunteer Department and members of our Auxiliary organize social events and some fundraising.

Mehlman: I’m sure our readers would love a brief glimpse into your personal life. Please tell me a little about your family.

Perry: I consider myself the luckiest woman in the world. My wonderful husband of 21 years, Aaron, is supportive and caring and is currently the chief cook, bottle washer and companion to our 12 year old son, Adam, as I spend most of my week in Baltimore. Parenthetically, we will move to Baltimore in July after Adam’s Bar Mitzvah. We are also blessed with two lovely daughters, Allie and Annie, who are away at college. I should also mention an additional perk of moving to Baltimore: I’ll be close to my brother, Steven, and his family who live in Washington, D.C.

Mehlman: Two last connected questions, and I thank you for all the time you’ve spent with me. What attracted you to a career in the healthcare business? What about your job do you find most satisfying?

Perry: I’ve always enjoyed challenges, and working in healthcare is a nonstop challenge. It makes me want to get up each morning and hurry to work. It’s an industry where you can really make a difference in people’s lives, where your greatest reward is helping people. In my opinion, you can’t beat that!

Change and transition are often difficult. All of us in the Sinai family are grateful Neil Meltzer is so able and well-prepared to take over for Warren Green at LifeBridge. After spending some time talking with Amy Perry and reviewing the amazing things she’s already accomplished, I can see why the Sinai board and staff are so excited that Amy has joined the team. Sinai couldn’t be in better hands!
Dr. Mark Katlic and the Center for Geriatric Surgery: Leaving No Stone Unturned

By Jill Waldman

Dr. Mark Katlic always tells his medical students, “Follow your curiosity. Follow your gut. Don’t think you’re wasting your time because you assume you probably won’t find something that someone else hasn’t already seen. Don’t choose a specialty based on where you think you’ll make the most money. Go where your heart is.” That’s how it began for Dr. Katlic. Following his curiosity and his heart led to a whole new aspect of his career, one that took him on an unexpected path.

After graduating from the Johns Hopkins University School of Medicine, Dr. Katlic first became interested in geriatric surgery during his surgery residency at the Massachusetts General Hospital. Towards the latter part of his training, purely by coincidence, Dr. Katlic took care of a number of patients who were more than one hundred years old. He was surprised that these patients, having only recently undergone successful surgery, were still healthy and vibrant. Dr. Katlic found them to be the most delightful patients he had ever cared for. Not only had they survived their surgeries, they had made full recoveries and were happy with the results.

Intrigued with the post-surgical outcomes in such elderly patients, Dr. Katlic went to the medical records room in the hospital basement to search for information about centenarians who had successfully undergone surgery. Careful research identified six patients, each of whom was still alive one or two years after surgery and they were all interesting and engaged. In fact, one of those patients went on to take an around-the-world cruise and then came back to lecture at a college geriatrics course.

Looking into the medical literature, Dr. Katlic found almost nothing in the field of geriatric surgery. He published his findings in the Journal of the American Medical Association (JAMA) in 1985 in an article entitled, “Surgery and Centenarians.” Mused Dr. Katlic, “Shows how one little thing can change the course of your career. That initial curiosity led me to research the cases of very elderly patients and write up their experiences. My research then caught the eye of a publisher who had read an Associated Press newspaper story. The publisher asked me if we needed a textbook on surgery and the elderly.”

Five years later, in 1990, Dr. Katlic published his first book, “Geriatric Surgery.” His textbook has been updated a number of times, and he has gone on to publish additional papers on surgery in the elderly, becoming one the foremost experts in the field. His journey has led him back to Baltimore and to Sinai Hospital where he was recently named Chief of Surgery.

Dr. Katlic, a specialist in thoracic surgery, enjoys patient care and looks forward to furthering his geriatric surgery research. Although some institutions, such as Sinai, provide excellent care in this field, across the country age remains a risk factor for complications, mortality, and lengthy hospital stays. Dr. Katlic wonders, “How can we do better? How can we improve the lives of elderly patients throughout the world. As the population ages and the number of conditions requiring surgery increases, virtually every elderly person is going to face the need for an operation. It becomes a necessary part of their care, and if we can decrease the risk of complications, we will increase the chance that they can get back to normal functioning. It’s not just length of life, really it’s more quality of life that we are talking about.”

Over the last five years, Dr. Katlic has focused his efforts on creating a Center for Geriatric Surgery with the goal of bringing together a multi-disciplinary team of people to study issues and provide advanced care. Explains Dr. Katlic, “There’s been some research over the years that shows that just plain pre-operative physical examination may not be enough because the elderly have less reserve. They’ll come through the operation fine, but not survive a complication because they don’t have the reserve strength that protects younger patients. We need to better anticipate these complications by doing a better evaluation before surgery is performed. We need to leave no stone unturned.”

As part of Sinai’s new Center for Geriatric Surgery, Dr. Katlic and his staff provide a tailored, individualized treatment plan for each patient, consisting of a comprehensive screening and assessment prior to surgery, which will properly determine a course of action based on individual patient needs.

The heart of the clinical program consists of comprehensive preoperative evaluations of elderly surgical patients at the Sinai Hospital Pre-Anesthesia Screening Service Clinic (PASS). These evaluations include routine physical
examinations and laboratory studies plus additional testing to evaluate conditions sometimes unique to the elderly: frailty, dementia, difficulty with activities of daily living, poor nutrition, delirium risk, fall risk and multiple medications. It also includes education for family members and caregivers at home.

The guiding principle of the Center is “Just-Right Care” - not too little, not too much, not too limited and not too aggressive. Each patient works with a dedicated clinical coordinator serving as his or her advocate during the hospital stay. The coordinator will help patients with daily medication review, family communication and discharge planning. The Center also utilizes a full-time nurse practitioner, JoAnn Coleman, CRNP, to better evaluate patients.

The care is complementary to that provided by the patient’s primary care doctor and adds to the evaluation. For example, tests of frailty such as grip strength and gait speed can be evaluated. If patients fail these tests, Dr. Katlic believes they are at higher risk for complications after surgery. Memory, vision and hearing can also be examined for deficits that may not be immediately apparent. The burden on caregivers such as family members is also evaluated with a specialized questionnaire. All this information is kept in a database and is accessible to any of the nurses and other professionals caring for a patient.

“A primary care doctor is not expected to take the time to do all of this. If we learn that something is important such as the frailty test, then it may become common practice for Sinai to include it in our pre-op procedure in the future,” says Dr. Katlic. “We may find that other hospitals have adopted a test that proves to be valuable. So far, there are many pleased patients. No patient has hesitated going through the extra evaluation. Universally, people are happy that they are getting the extra attention. Even though they don’t anticipate it, they are willing to stay the extra 20 minutes after their routine blood work.”

The Center’s protocol calls for every patient over 75 coming in for major, elective surgery to be evaluated. Currently, patients come to the pre-op testing area to do routine blood work, and then are scheduled to see nurse practitioner Coleman. If patients are unable to make a preoperative appointment, day of surgery evaluations are also available. Pre-op testing is performed by PASS on the second floor of Weinberg Center. In the future, it will likely move to the new ambulatory building currently under development at the Sinai campus.

The results of this “leave no stone unturned” comprehensive evaluation are being carefully studied. Determining what factors are most important in evaluating the risk of surgery will help refine the process further. Dr. Katlic explains, “The academic or educational component, the second arm of the program, is where we do research on what we’ve learned; putting everything we’ve learned and evaluations into a database so we can find out what is important and what isn’t. For example, if we identify particularly frail patients, we may determine whether there is any value in putting them through a few weeks of pre-habilitation, a strengthening program before their surgery.”

An important goal of the Center is to decrease prejudice against the elderly. Ageism exists in both general society and in medicine. For example, studies have shown that the older you get, the less likely you are to be transported to a designated trauma center. Also, the elderly are not treated as aggressively for cancer and are often referred too late for needed surgery. Hopefully, further research will identify ways to differentiate between situations requiring aggressive treatment and those responding to a more conservative approach.

Dr. Katlic hopes that this process will spearhead Sinai’s drive to become recognized for its geriatric expertise, both in surgery and in all aspects of elder patient care. The Center opened officially at the end of September. Dr. Katlic looks forward to expanding the scope of the Center in the future to better serve the entire LifeBridge community and to impact medical care in general.
Sinai’s Herman & Walter Samuelson Children’s Hospital

Those who have seen “Children of the Sea”, the WOW! sculpture that graces the lobby of the Samuelson Children’s Hospital know why the Sinai Auxiliary is so proud to have sponsored its creation.

The Herman & Walter Samuelson Children’s Hospital at Sinai opened its doors in March 2012, and in its first year has admitted over 5,000 patients. Offering a full spectrum of pediatric specialty services to patients from birth to 18 years of age and older, the Samuelson Children’s Hospital supports area pediatricians with the most comprehensive range of services of any community hospital in Maryland. The new facility embraces a family centered philosophy, featuring private, ergonomic inpatient rooms with a sleep area for parents, space for the patient care team to confer by the patient’s bedside and fully equipped private bathrooms. Each inpatient room is equipped with a video game system and a 42 inch flat screen television.

The Children’s Hospital houses the Alfred I. Coplan Pediatric Hematology Oncology Outpatient Center, an expanded Children’s Diagnostic Center, a physical therapy treatment room and an on-site outpatient pharmacy. Child life specialists provide emotional support for families and encourage optimum development of children facing a broad range of difficult and challenging experiences.

Knowing the close connection between a hopeful, positive attitude and a healthy body, planners of the Samuelson Children’s Hospital made sure that the new facility is bright, cheery and appealing to children. In fact, when you walk into the new Children’s Hospital, you may think you’re at Baltimore’s National Aquarium! The interior theme is a marine motif throughout the hospital, from the large, eye-catching “Children of the Sea” sculpture in the hospital lobby, to the marine décor decorating the large and airy new playroom, stocked with toys, games and two television sets (The playroom is divided into two sections, one for kids and one for adolescents), to the inpatient rooms where televisions offer access to a live broadcast each day from Baltimore’s National Aquarium.

The designer of the lobby sculpture and of the playroom décor is Dan Daddona, a talented and creative artist and sculptor from Pomano Beach, Florida. Daddona was contacted by Fran Davidson, president of Art Resource and a friend of Dorothy Hellman, Sinai’s Director of Design and Construction. Daddona said that the idea for his design occurred to him almost immediately after speaking with Ms. Hellman although the construction process then took several months. During this time, Daddona was undergoing chemotherapy treatment for multiple myeloma and found the time he spent creating the sculpture emotionally therapeutic. “Designing ‘Children of the Sea’ was a labor of love,” Daddona explained. “I know what it’s like to be scared, in pain, drained of energy, losing your hair. I could relate to the children who would be walking into Sinai’s Children’s Hospital trying to be brave but uncertain of what awaited them. As I progressed in my design, I kept thinking of those kids and of how I hoped my lobby sculpture and playroom decorations would put smiles on their faces and help them, if only for a few minutes, forget their problems.”

From the feedback we’ve received, Dan Daddona succeeded beyond his wildest dreams.
Auxiliary Grants 2013

We are thrilled that the annual awards we make under our Auxiliary Grants and Awards Program continue to enhance the quality of patient care and service to the Sinai community by helping pay for important equipment or programs that otherwise lack funding sources at the hospital. The selection process is always interesting and difficult; many worthy applicants make requests, and our board must choose from among them.

This year we are pleased to have awarded four grants. The first is to the Alvin & Lois Lapidus Cancer Institute at Sinai to expand the supportive care programs that we funded last year. Clinical trials have shown that certain supportive care therapies, i.e., non-invasive therapeutic approaches, when offered by well-qualified professionals and integrated with ongoing cancer treatment, can boost patients’ immune systems and help fight their cancers.

We are contributing funds to the ICU to help purchase a Mottomed Letto 2 movement therapy system, a device similar to a recumbent bike used at the bedside to exercise the legs of patients where mobility challenges exist. Consisting of motorized pedals stationed at the foot of the bed with a display screen that allows the therapist to individualize the settings and monitor patients’ progress, this innovative technology helps mobilize critically ill patients. Early mobilization is well researched to show benefits to ICU patients for both short and long term recovery, preventing bed rest related complications.

We have allocated funding to the Epilepsy Monitoring Unit of the Sandra & Malcolm Berman Brain and Spine Institute for the purchase of two mobile foot-pedal bikes and four combination TV/DVD units. Typically, patients admitted to the unit are confined to their rooms for three to five days, with electrodes attached to their heads, so the healthcare team can monitor and evaluate their brain activity and catalogue the occurrence of epileptic seizures. Our grant is for the comfort, diversion and health of patients as they endure the discomfort of this prolonged confinement while their condition is diagnosed.

Finally, we are happy to play a role in the success of Sinai’s kosher Hospitality Room. Our Auxiliary is making sure that the room, set up through a partnership between Sinai Hospital and Bikur Cholim, will be stocked with fresh kosher food and snacks each day.

An Interview with Yolanda Marzouk, Patient Navigator

By Judy Mehlman

Following are excerpts from an interview I had with Yolanda Marzouk, patient navigator at Sinai’s Alvin & Lois Lapidus Cancer Institute.

Judy: Yolanda, your title is “patient navigator.” What is a patient navigator and what are your responsibilities?

Yolanda: As you can imagine, patients who have been newly diagnosed with cancer are upset, frightened and often feel a loss of control over their lives. I try to be a source of reassurance and information. I meet with new patients when they come in for their first chemotherapy treatment, answer questions, assist with possible barriers to care (such as transportation problems to and from the Cancer Institute for treatment) and present support group options.

J: The Auxiliary was pleased to provide a grant to your department both last year and, based on your glowing feedback, again this year for the implementation and expansion of the Integrative Therapy Program. Please tell our readers about your program.

Y: As indicated in our grant proposal, the program was designed to improve the well-being of our patients by providing stress reduction and relaxation to participants as they undergo the tedious process of protracted and repeated infusion therapy. All the therapies we offer are conducted by trained professionals.

J: Approximately how many people have taken part in the program and what is the age range?

Y: Several hundred patients have participated, our youngest only 21 years old and most senior, 92.

J: In your application for the grant last year, you indicated that the Integrative Therapy Program involves several modalities - art, music and guided imagery meditation. Let’s start with art.

Y: We have an artist who comes in twice a month and offers workshops at the infusion center and an art therapist who is on site twice a week and works with participants on a one-to-one basis as they undergo their infusion treatments. Some of our patients have never painted before, and we are overwhelmed by the quality of their previously undiscovered talent! (Please see patient artwork on the right)

One of our participants was so enthusiastic that she changed the day of her treatment just so she could be at the Institute when the art therapist was here.

J: What about the music component of your program?

Y: We currently have a guitarist/singer who comes in once a month and sings in the infusion center and a student from the Peabody Institute who plays music each month.

J: Please tell our readers about other segments of the Integrative Therapy Program.

Y: Our guided imaging therapy uses CDs and DVDs to help patients achieve a sense of calm and peace by guiding them to a relaxing place they’ve experienced in the past. We offer a monthly support group in which a visiting psychotherapist teaches an emotional freedom technique. This year we initiated meditation therapy and Reiki, a technique of “off-body” healing practiced in many oncology facilities.

It’s interesting and gratifying for our staff to witness how many patients begin the Integrative Therapy Program as naysayers or skeptics and end up as enthusiastic participants. We and our patients really appreciate the Auxiliary’s support for this important program.
Meaningful Greetings

Need to send a card for a special occasion: condolence, birth of a baby, get well wish or just about anything? At some point we all send cards for one reason or another. By choosing one of the Sinai Auxiliary’s Meaningful Greetings cards, you will also be making a contribution that will support important programs and departments within Sinai Hospital.

We offer a variety of cards and you can personalize your message. Following is a list of cards and the funds they support:

- General Gift Fund: $5 each or six for $25
- Children are Special (Pediatric Intensive Care Unit): $5 each or six for $25
- Research and Education: $10 each
- Alvin & Lois Lapidus Cancer Institute: $10 each
- Sinai Heart Center (Heart Pillow): $20 each
- Baby Closet (supplies layette essentials for an infant born to a family in need): $20
- Newborn Knitting Card: $50
- First Grader Program: $75

To purchase our beautiful cards, simply call the Auxiliary office at 410-601-5033 and we’ll fill them out and mail them for you.

Each year the Sinai Auxiliary also makes your High Holidays preparations easier by addressing and mailing our cards to your family and friends in honor of the New Year. Cards sell for $5 each or 10 for $40. Send your list with names, addresses (apartment number, if applicable), including zip codes, to Sinai Hospital Auxiliary, 2401 W. Belvedere Ave, Baltimore, MD 21215 or e-mail your list by July 19 to maaronso@lifebridgehealth.org. Please include your mailing address and telephone number so we can bill you. Then relax and enjoy your summer!

Holiday Celebrations

Sukkot  All are welcomed to say a prayer, enjoy a meal or a respite from a busy day in Sinai’s sukkah, thanks to the hard work and creativity of board member and Sinai nurse Feigi Oberstein and her band of helper/decorators from the Bais Yaakov School.

Chanukah 2012  The third and fourth grade chorus from Krieger-Schecter Day School serenaded family and visitors in the hospital Atrium on the first night of Chanukah celebration sponsored by the Auxiliary.

THE SINAI HOSPITAL AUXILIARY
2401 West Belvedere Avenue
Baltimore, Maryland 21215

2012 - 2013 AUXILIARY OFFICERS
JOANN NAGY, CHAIR
JUDY MEHRMAN, VICE CHAIR
REBECCA SIBOIT, TREASURER
JILL WALDMAN, SECRETARY

AUXILIARY STAFF
MARCIA AARONSON, AUXILIARY PROGRAM LIason

EDITORIAL COMMITTEE
JUDY MEHRMAN
JILL WALDMAN