Construction Underway On
New Bone & Joint Institute

ALSO:
Advances in Cardiac Care
Neuroscience Center
And More
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Sincerely,

Stuart K. Markowitz, MD
President, Hartford Hospital &
Senior Vice President, Hartford HealthCare

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The dynamic lines of the new Hartford HealthCare Bone & Joint Institute at Hartford Hospital, now under construction at Retreat Avenue and Seymour Street, will be a stunning addition to the hospital’s campus. More importantly, it will be the ideal setting for providing a range of orthopedic services which will be unique in the region.

“We're creating something that doesn’t exist in this area: a comprehensive center of excellence with a regional focus,” says orthopedic surgeon Courtland Lewis, MD, the Institute's physician-in-chief. Lewis expects the Institute to become a destination for patients from across the Northeast because “there's nothing quite like it in New England.”

The Institute will bring together in one place all the medical, surgical and rehabilitation services necessary to provide expert, highly coordinated diagnosis and treatment of orthopedic and musculoskeletal conditions. It also will focus on preventive care and education of patients, families and providers.

The project is a collaborative effort between Hartford HealthCare (HHC) and Bone & Joint Institute Physicians LLC, which includes more than 50 physicians from multiple disciplines, including orthopedic surgery, rheumatology, anesthesiology, pain management, radiology and hospital medicine.

The new complex, designed to suggest a human joint in motion, is slated to open in late 2016. It will include a five-story inpatient building and a four-story ambulatory and medical building. The two will be connected by a walkway over Seymour Street. The 130,000-square-foot inpatient care unit will feature 60 private rooms, 10 operating rooms, a post-anesthesia care unit (PACU), rehabilitation facilities, a radiology suite, a Center for Sports & Fitness and after-hours orthopedic urgent-care services. Amenities include a spacious lobby and a café. The ambulatory building will have three ambulatory surgery rooms and medical offices occupying 35,000 square feet. Procedures such as total joint replacement, spine surgery and fracture repair will be performed at the inpatient facility, while hand, foot or ankle surgery, as well as minimally invasive (arthroscopic) knee surgery, will be done at the outpatient center.

Where certain procedures are performed may change over time, says Institute Medical Director Ross Benthien, MD. “We have plans to innovate around spine and total joint procedures,” he notes, “and these may eventually be done in the ambulatory center.”

During the project’s planning stages, physicians and administrators traveled to several of the country’s leading musculoskeletal centers to explore best practices and how to adapt them to the Hartford project. Two prominent architectural firms collaborated on the design. The result is a physical environment with the most advanced features and technologies.

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The new buildings will streamline care by having all clinicians in one place. Additional services will be added once the new facility is operational. But innovations in the way care is provided already are well underway. “In essence, the Institute exists today,” says David Santoro, MBA, OTR/L, the Institute’s director of operations. “We have inpatient units at Hartford Hospital, dedicated operating rooms and a PACU, and teams working together to ready systems and operations in preparation for the move.”

Kim Hayes, MS, BSN, director of nursing at the Institute, says that teams are establishing effective processes right now “so that when the doors of the new building open, the transition will be seamless.”

Demand for advanced orthopedics continues to grow, as baby boomers age and want to maintain an active lifestyle.

Redesigning Care
Lewis has practiced in the Greater Hartford area for more than 25 years. He says the quality of orthopedic care is very high in the area, but that the Institute will take it to a new level. “By starting from scratch, we can redesign the way we take care of people and organize the layout of the new hospital to fulfill our vision of doing things better and continuously improving. For me, living that vision is really important.”

Lewis describes the Institute as a “hospital within a hospital” that focuses exclusively on providing a complete continuum of care to orthopedic and musculoskeletal patients. “By creating this team — everybody from nurses to anesthetists to the housekeeping staff — we can manage the whole episode of care, from when the patient chooses a surgical date to when the patient returns to the office for follow-up,” he says.

Having an entire team dedicated exclusively to the Institute is essential to top-quality care, says Dawn Tranter, RN, inpatient unit manager. “Science demonstrates that when you have dedicated teams, team members become experts in care, which produces quality, safety, positive outcomes and an exceptional patient and family experience.” Plus, talented professionals want to be part of expert teams, which will help the Institute continue to recruit the best people. “Talent is our greatest resource,” says Tranter.

The 50-plus physicians on the Institute’s medical staff are all fellowship trained; that is, they have extensive education and experience in their specialties. Benthien, who did his residency in orthopedics at Hartford Hospital before completing two fellowships, says, “I’m practicing with many of my orthopedic heroes — awesome surgeons who took great care of patients and taught me how to do orthopedics.”

Hayes points out that the Institute’s nursing staff is expert in the care of musculoskeletal and orthopedic patients. All the nurses are highly educated in the unique needs of this population, and those who work in the preoperative and PACU areas are trained in critical care. Still, she says, creating a positive patient and family experience is everyone’s responsibility. “It’s all of us as a team — physicians, nurses, patient care associates, environmental services — every point of encounter the patient has — who are responsible for the patient’s experience.”

The team’s exclusive focus on this patient population, Tranter says, gives them “an understanding of the impact the injury or surgery has on the patient and family and ensures empathetic and sensitive care.”

Another feature that sets the Institute apart is the range of patients it is prepared to care for. “We’re a unique system, because we are a Level I trauma center [where the area’s most severely injured patients are taken for care],” says Benthien. “We have to be sure we can care for the high-acuity patient, but also provide the polished experience that someone having an elective procedure would want to see.”

Prepared Patients, Better Outcomes
The Institute has developed an innovative preoperative education and evaluation program for patients having elective surgery. PREPARE — shorthand for Procedure-Related Education and Pre-Anesthesia Risk Evaluation — is under the direction of Karen Livingston, APRN. It is designed to ensure that every patient has a safe and successful surgery. PREPARE helps patients understand what to expect before and after surgery. More importantly, it identifies ahead of time any
factors that might put the patient at increased risk for complications, so that care can be tailored to the patient’s unique needs.

The PREPARE program begins with a registered nurse calling the patient about a month before surgery to take a medical history. Then the patient visits the PREPARE center. Depending on his or her health status, the patient may be instructed to see a cardiologist or pulmonologist (lung specialist) or have certain tests performed. Patients who have risk factors, such as high body mass index or heart problems, are flagged as possibly needing a higher level of care while hospitalized, a longer period in the PACU, or a period in a rehabilitation facility after discharge. This knowledge allows the care team to prepare the patient and make whatever arrangements are necessary for optimal care. “It’s all done ahead of time,” says Livingston. “The more we know up-front, the better the patient’s outcome will be.”

The Institute offers preoperative educational classes for patients and their families prior to elective surgeries, such as total joint replacements. Instructors explain what to expect, including what the course of treatment will be, who the members of the care team will be and what the recovery period will be like. Karen DePasquale, RN, nurse navigator, who runs the classes, says “They decrease stress and lead to a better patient experience. Patients who are educated and understand what to expect have better quality outcomes.”

Hayes points out that during the patient’s hospital stay, nurses and physical therapists reinforce the information presented in the class. They also educate patients who have had unplanned procedures, such as fracture repairs. When patients are discharged, clinicians review medications, the recommended activity level, wound care and any other issues of concern to the patient.

Promoting Wellness
The opening of the new facilities will allow the Bone & Joint Institute to expand its services, especially those designed to prevent health problems in the first place.

The Institute has partnered with the Hartford HealthCare Rehabilitation Network to create the Sports & Fitness Center that will be located in the inpatient building. The center will provide multispecialty evaluations of individuals’ health risks and recommend steps to address them. An example is the planned Fragility Fracture Program. If a patient with osteoporosis has sustained a fracture, the program will work with the patient on special rehabilitation, balance issues, osteoporosis therapy and lifestyle changes to try to prevent future fractures.

The Sports & Fitness Center also will feature a motion-analysis laboratory, exercise equipment and space for classes on health and wellness topics.

Obesity, which is so prevalent today, contributes to many health issues, including osteoarthritis, that eventually can necessitate joint replacement. The Institute’s Sports & Fitness Center will collaborate with Hartford Hospital’s Integrative Medicine Department to offer education on healthy eating and lifestyle changes to help people lose that excess weight. The center will have a demonstration kitchen where people can learn about healthy cooking and eating.

“We’re trying to help people better understand the disease process they face and take advantage of preventive care resources that may help them avoid surgery,” Santoro says. “Surgery should be the last option.”

The Big Picture
The Institute’s leaders envision a continuing evolution of services and initiatives. These include developing tools to help primary care providers employ evidence-based practices when treating patients with musculoskeletal problems and conducting research to determine optimal treatments. All relate to the Institute’s overarching goal. “We’re all about ‘Life in Motion,’” says Lewis, referring to the Institute’s motto. “We’re all about getting people back to where they want and need to be.”

Hartford Hospital recently became the first in the region to use a new, high-technology device for orthopedic surgery. MAKOplasty® for partial knee resurfacing and total hip replacement uses the RIO® Robotic Arm Interactive Orthopedic System. RIO is a surgeon-controlled robotic arm system that enables surgeons to personalize partial knee resurfacing and total hip replacements to achieve excellent results with greater precision than ever before.
Kidney exchange benefits patients
Hartford Hospital was involved in the longest kidney transplant chain ever accomplished. Twenty-six hospitals participated in the chain, in which 34 kidneys were exchanged, ensuring that the vital organs reached the most appropriate transplant recipients. The chain, which was covered by ABC’s “Nightline,” was called a chain of love and took three months to be implemented.

In other transplant news, Hartford Hospital’s kidney and heart transplant teams have been accepted into Optum’s Center of Excellence for Transplants. Optum’s Clinical Sciences Institute evaluates transplant programs throughout the United States and only includes transplant programs that meet strict Centers of Excellence criteria. The transplant program also is an Aetna Institute of Excellence and an Anthem Center of Excellence.

Advancing cardiac care for athletes
Dr. Paul Thompson, chief of the Hartford Hospital Department of Cardiology; Beth Taylor, PhD; and Amanda Zaleski, MS, collected data at the Boston Marathon in April for a study, “Investigating Deep Vein Thrombosis Risk in Women At Flight,” to examine the influence of estrogen-based oral contraceptives on blood-clot risk in active women. The study team is funded by the NASA CT Space Grant Consortium. Dr. Thompson also presented two lectures as part of Boston Marathon’s medical events. On April 18, he lectured at the American Medical Athletic Association’s Annual Boston meeting on premature coronary artery disease in lifelong endurance athletes. He also presented the annual marathon lecture, “Cardiac Problems in Veteran Endurance Athletes” at Massachusetts General Hospital.

Awards and Accolades
Hartford Hospital’s Stroke Team received the Get With the Guidelines® Stroke Gold Plus and Target Stroke Elite Honor Roll awards from the American Heart Association and American Stroke Association. The awards recognize hospitals that achieve at least 85 percent compliance in each of the seven Get With The Guidelines Stroke Achievement Measures.

Hartford Hospital has also earned two Women’s Choice Awards®, including recognition as one of America’s Best Stroke Centers. This distinction is the first of its kind in the United States and is awarded to hospitals that carry the certification of an Advanced Primary Stroke Center or Advanced Comprehensive Stroke Center from the Joint Commission and have achieved above-average patient recommendation scores. The award seal, issued to only 250 hospitals nationwide, is the only recognition that integrates clinical excellence and the patient experience. Hartford Hospital also received the Women’s Choice Award for America’s Best Hospitals, Orthopedics, based on its comprehensive orthopedic services and performance on Centers for Medicaid & Medicare Services measures.

Hospital selected as research site for cardiac clip
Hartford Hospital has been chosen as a research site for the COAPT (Clinical Outcomes Assessment of the MitraClip Percutaneous Therapy) Trial, which will study an investigational device in patients who have functional mitral regurgitation and are not appropriate candidates for mitral-valve surgery. The trial will evaluate the safety
and effectiveness of the MitraClip System for the treatment of moderate-to-severe or severe functional mitral regurgitation in symptomatic heart failure patients who are treated per standard of care and who have been determined by the site’s local heart team as high risk for mitral-valve surgery. The COAPT Trial will study up to 430 patients at as many as 85 medical centers in the U.S and Canada.

In May, the hospital’s Structural Heart Program at Hartford Hospital marked a milestone in cardiac care by completing their 200th trans-catheter aortic valve replacement (TAVR).

**Unique prostate procedure eliminates need for oral medications**

In June, Hartford Hospital physicians performed their first prostate embolization for benign prostatic hypertrophy (BPH). This may be the first time this procedure for enlarged prostate glands has been performed in New England. Hartford Hospital has a unique technology — not available at nearby hospitals — that enables the procedure, which has been shown to be very effective for long-term treatment of BPH, eliminating the need for oral medications.

**Hospital staff recognized**

Dr. Godfrey Pearlson, founding director of the Institute of Living’s Olin Neuropsychiatry Research Center at Hartford Hospital, received the 2015 Stanley Dean Award for Research in Schizophrenia from the American College of Psychiatrists (ACP). The award recognized his lifetime achievements in schizophrenia research, which the ACP said constitutes a “major contribution to the understanding and treatment of schizophrenic disorders.” Dr. Pearlson has studied the intricacies of the brain to determine whether or not there are biological differences between schizophrenia and bipolar disorder.

Yvette Melendez, Hartford Hospital’s vice president of Government and Community Alliances, was selected by the Malta House of Care as one of their six Wonder Women for 2015. Recipients are recognized for their public service and philanthropy. Malta House provides free primary health care and preventive medical services to financially challenged adults in Greater Hartford. Care is provided at a mobile clinic by volunteer physicians and nurses.

Dr. Subramani Seetharama, director of Hartford Hospital’s Spinal Cord Injury Program, received the 2014 YMCA Healthy Living Award, which is given to individuals who quietly and tirelessly work for a cause outside the spotlight.

Dr. Robert Brautigam, critical care surgeon at Hartford Hospital, was named a “Hometown Hero” by the Hartford Courant. He was nominated by a fellow Hartford Hospital employee for the dedicated and compassionate care he gave her son, who was critically injured in a motorcycle accident.

Dr. Lenworth Jacobs, Hartford Hospital vice president of Academic Affairs, presented the most-recent work of the Hartford Consensus at the White House. The Consensus, a group of national professionals, met in Hartford in April to create the Hartford Consensus III Document, a national policy to enhance survivability from intentional mass-casualty and active-shooter events. The meeting was sponsored by the American College of Surgeons (ACS). Participants included the president of the ACS and senior leadership from the ACS Committee on Trauma. In addition, there was representation from the White House, the National Security Council, the U.S. military, Homeland Security, FEMA, the FBI, emergency medicine, and other medical professionals. Doug Elliot, president of The Hartford and chair of the board of directors of Hartford Hospital, represented the private sector. The thrust of the document is to empower the public to become involved as immediate responders to stop bleeding in these catastrophic events. It also underlines the importance of full integration of professional first-responding groups to rapidly and efficiently transport patients to appropriate hospitals for definitive care.
There's good news for people with some common heart ailments. Today's new treatments can relieve symptoms and offer a better, often longer, quality of life, and they're provided by expert teams at Hartford Hospital.

HELP FOR CHRONIC TOTAL OCCLUSION
Hartford Hospital is one of only 50 centers in the country using advanced equipment and minimally invasive techniques to treat a once nearly untreatable condition called chronic coronary total occlusion.

Over time, major arteries of the heart can become completely blocked or “occluded” by a buildup of plaque and cholesterol. “Many times, coronary arteries will become 100 percent closed, and patients don’t even know it,” says Jeffrey Hirst, MD, an interventional cardiologist and co-director of the Chronic Total Occlusion (CTO) program at Hartford Hospital. “It can be a silent event.”

The heart tries to compensate. Other arteries may form “collaterals,” smaller blood vessels that carry blood — and critical oxygen — to the blocked artery. But with a major blood vessel totally occluded, the heart can’t get the oxygen it needs. Patients develop chest pain and pressure, called angina, and suffer incapacitating shortness of breath.

Until recently, little could be done for these patients. Medications are only modestly effective. Angioplasty, in which a catheter is used to insert a balloon or stent to open a partially blocked artery, isn’t possible once the artery is totally occluded. The only alternative was open heart surgery, a major operation with substantial risks. Today, there’s a better solution, says Hartford Hospital interventional cardiologist Daniel Fram, MD, co-director of the CTO program. “In the last few years, a number of new devices have been developed that help physicians open up arteries that are totally occluded,” Fram says. These new devices allow physicians to treat the blockage endoscopically, that is, from within the blood vessel. One device can be rotated like a corkscrew so it passes through or around the blockage. Used with a second device, it can be passed between the inner and middle layers of the artery wall and then be guided back into the “lumen,” or center of the artery, on the other side of the blockage. “You virtually make a new artery,” Hirst says. Still another possibility is passing the wire through a collateral vessel and coming at the blockage from the other side. The procedure is done in the cardiac catheterization lab under X-ray guidance.

“With these catheter-based endovascular techniques, we can open arteries without subjecting patients to open heart surgery,” says Hirst. Fram notes that with the new devices and techniques, “Success rates have gone from 40 to 85 percent. Some patients weren’t candidates for surgery, so they were stuck with their symptoms. Patients have had relief from angina and a better quality of life because of these techniques.”
Hartford Hospital performs more CTO procedures than any other program in New England. Fram and Hirst collaborate on the procedures, which are complicated and can take from two to five hours. “All 160 cases we’ve done, we’ve done together,” Hirst says. “Four experienced hands are better than two.”

**TAVR OFFERS HOPE**

Aortic valve stenosis, a narrowing of the heart’s aortic valve, affects approximately 1.5 million people in the United States. About a quarter-million of them have severe symptoms that restrict activities and reduce the quality and length of their lives. Many are elderly or ill, so they can’t undergo open heart surgery to replace the valve. Hartford Hospital made history in 2012 when it became the first in the region to use the Edwards SAPIEN transcatheter heart valve to replace patients’ aortic valves without surgery. The device enabled physicians to replace aortic valves via a catheter inserted into an artery and guided to the heart. Transcatheter aortic valve replacement, or TAVR, gave new hope to people with stenosis who were not candidates for surgery.

Since then, Hartford Hospital’s multidisciplinary TAVR team has performed more than 220 TAVR procedures, with excellent results. There have been some changes along the way. The Food and Drug Administration, which originally approved TAVR only for patients categorized as being at “extreme” risk of dying after open heart surgery, has extended it to patients deemed “high” risk. Hartford Hospital is participating in a trial examining use of TAVR in patients at “intermediate” risk, as well.

Another change is that new catheters are much smaller. The smaller catheters allow more procedures to be done through the femoral artery in the groin. Using the femoral artery creates less risk than the two alternative approaches: using the subclavian artery, which is within the chest, or going through the chest wall.

The often unsung heroes of the sophisticated procedure are the members of the hospital’s multidisciplinary TAVR Team. Patients being considered for TAVR undergo a rigorous screening process by clinicians from echocardiography, cardiac catheterization, cardiac surgery, radiology, pulmonology, anesthesiology, palliative care, discharge planning and more. The entire team reviews findings. Taking part in the procedure itself are approximately 20 professionals from those areas, as well as interventional cardiologists, catheterization lab nurses, technicians and surgical assistants.

Raymond McKay, MD, director of interventional cardiology research at Hartford Hospital, says that the skill of the TAVR team, the robust screening process and the superior technology combine to produce the hospital’s excellent patient outcomes. He adds that the number of people undergoing TAVR is expected to quadruple in the next 10 years. “This is a lifesaving procedure,” McKay says, “and only a fraction of the people who need it have been treated to date.”

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THE BEAT GOES ON

Hartford Hospital electrophysiologists — heart rhythm specialists — recently became the first in the region to implant two innovative devices: one to monitor patients’ heart rhythms and the other to prevent sudden cardiac arrest (SCA).

The Medtronic Reveal LINQ loop recorder is an implantable cardiac monitor that is injected just under the patient’s skin to detect abnormal heart rhythms that can cause palpitations, fainting and even stroke. The recorder transmits information wirelessly to the patient’s physician almost immediately. Steven Zweibel, MD, director of electrophysiology at Hartford Hospital, says that by revealing abnormalities as they occur, the device “allows us to individualize appropriate and necessary treatments for our patients.”

SCA occurs when the heart’s electrical activity becomes chaotic. Until recently, patients at risk for SCA had to have a defibrillator implanted using insulated wires, called leads, placed in the heart, ready to provide a “shock” if necessary to restore normal rhythm. A new device, Boston Scientific’s subcutaneous implantable defibrillator (S-ICD), however, offers the same protection, but sits just beneath the skin and leaves the heart and blood vessels untouched. Edmond Cronin, MD, the first to implant the S-ICD system, says; “With more people at risk for sudden cardiac arrest, we must be at the forefront with leading-edge treatment protocols to provide patients with the best possible protection.”

Lucky to Have the BEST CARE

Mark Brien describes himself as “a very lucky guy, both professionally and medically.” The retired Coventry resident had a career he was passionate about: piloting Gulfstream jets for major corporations. He was also one of the first Hartford Hospital patients to undergo an innovative, minimally invasive angioplasty procedure to open a totally occluded coronary artery.

Brien was apparently healthy in 1995 when he had a heart attack that caused his heart to abruptly stop beating, a condition known as sudden cardiac arrest. His wife, Theresa, a Hartford Hospital nurse, called 911 and kept Brien alive by performing CPR until emergency responders arrived. At Hartford Hospital, interventional cardiologist Daniel Fram, MD, performed a balloon angioplasty to clear the blockage that had caused the attack and inserted a stent to keep the artery open.

Back in good health, Brien was able to return to flying. Like all pilots, he was required by the Federal Aviation Administration to have regular stress tests to monitor his coronary health. In late 2010, Brien got bad news. An angiogram showed his artery was occluded again, this time completely and for longer than three months, a condition known as “chronic total occlusion.” Standard angioplasty procedures had never worked well for these types of blockages. Unless he underwent major open-heart surgery, Brien’s days as a pilot were over.

But Fram and his colleague, Dr. Jeffrey Hirst, proposed using a sophisticated new angioplasty technique known as a “retrograde” procedure. Since the usual, frontal approach would not work in Brien’s case, they would thread a tiny wire through thin “collateral” blood vessels and use a balloon and stent to clear the blockage from its back side. “It had only been done for about four years at that time, and only a handful of hospitals in the country had experience with it,” says Fram. “It was an unusual, much more complex and higher-end technique that required a team approach.”

Brien agreed, and Drs. Fram and Hirst, working as a team, did the procedure in January 2011. “I came home the next day,” Brien recalls. Was he nervous? “No, I was fine with it, because I thought, ‘This is Hartford Hospital and this is Fram and Hirst.’ I never thought the outcome would be anything except good.”

The procedure was successful. With the artery open, Brien could once again take to the skies, doing the work he loved for several more years until his retirement.

“I’ve been fine since then,” Brien says. He takes his medication faithfully and tries to stay active and in good physical condition, walking, working outside and fishing — especially fishing. “It’s nice and quiet,” he says. “I listen to the birds. I pay attention to the sky. I know how lucky I am.”
The most sophisticated technology that exists can’t compare to the human body's amazing central nervous system. Made up of the brain and spinal cord, and connected to billions of nerve cells throughout the body, the central nervous system is what enables us to interact with the world around us — to see, speak, hear, move and touch. It is how we are able to feel emotions, have ideas, learn new things and recall memories. It literally keeps us alive, telling our hearts to beat, our lungs to inflate, our metabolism to break down that salad we just had for lunch.

When a person’s central nervous system is disrupted, whether by stroke, disease or injury, he or she requires expert, highly coordinated care from specialists in a variety of related fields. That’s why Hartford Hospital has established a comprehensive Neuroscience Center.

The Neuroscience Center brings together specialists with expertise in diagnosing and treating disorders of the nervous system, from the common to the most complex. It includes experts in neurology, neurosurgery, physical medicine, neuropsychology, behavioral health and more.

Hartford Hospital's Neuroscience Center brings together all the expertise needed to provide advanced treatment for even the most complex diseases of the brain and spine.

INTEGRATED EXCELLENCE

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psychology, rehabilitation and other fields, who collaborate with each other and additional specialists to ensure each patient receives integrated, optimal care.

“The Neuroscience Center gives us the ability to provide coordinated care to all patients who suffer from neurosurgical, neurological or psychiatric conditions that can be treated medically or surgically,” says Inam Kureshi, MD, chairman of Hartford Hospital’s Department of Neurosurgery. A key feature of the center, Kureshi says, is that it is “patient-centered,” that is, it brings together specialists able to provide comprehensive care for each patient’s disease or condition. “If a patient goes to our Stroke Center, for example, they will have access to a team of providers who specialize in various aspects of their care,” Kureshi says. “The philosophy is to bring specialists to the patient, rather than the patient having to struggle to find the specialist who fits their needs.”

According to The Advisory Board Company, a global research firm that studies healthcare trends, the number of patients needing neuroscience care is growing. The firm projects a 43 percent increase in outpatient neuroscience services over the next 10 years in areas such as spine surgery, neurodiagnostics (electroencephalograms to record electrical activity of the brain and nerve-conduction tests), sleep issues and pain management.

A Complete Range of Services
Hartford Hospital’s Neuroscience Center is made up of numerous centers and programs that focus on research, diagnosis and treatment related to the full range of neurological and neurosurgical conditions. Components of the center include those focused on general neurology, neurosurgery, neuromuscular, stroke, neuro-oncology (cancer of the brain or spine) hearing and balance, and epilepsy. Together, they provide the most advanced care for patients with many neuroscience-related conditions.

Several recent innovations are expanding the Neuroscience Center’s range of expertise. These include a Headache Center, a Movement Disorders Center and an Epilepsy Surgery Program. The new programs complement the center’s well-established ones.

Relief from Headache Pain
The Neuroscience Center recently established an outpatient Headache Center. The Headache Center’s medical director is Brian Grosberg, MD, a board-certified neurologist and headache specialist and the former director of the world-renowned Montefiore Headache Center in New York City.

Grosberg says he chose to lead the new center because he and Hartford HealthCare share the same “vision of excellence.”

“We are creating and growing a state and nationally recognized, comprehensive, multidisciplinary headache program that provides individualized care,” Grosberg says. “We’re all about the patients and making sure they get what they need.”

The center will diagnose and treat headache in all its forms, but Grosberg says the most common type that people seek treatment for is migraine. About 36 million people in the United States, the vast majority of them women, suffer from migraines. Grosberg tailors his approach to each individual patient, using both medical and nonmedical therapies. For those with headaches that are particularly debilitating, relentless or nausea-producing, the center offers intravenous infusion therapy.

“Very few places in the country have the capability or skill to do this,” says Grosberg. The center is working with Hartford Hospital’s Maternal-Fetal Medicine team to provide other services that are hard to find: safe, effective injections of anesthetic at pain sites and outpatient intravenous therapy for pregnant women suffering from headaches.

Looking ahead, Grosberg says the center will train nurse practitioners and fellows, form partnerships with various headache organizations and collaborate with colleagues on both research and patient care. He also envisions a “telemedicine” component that
would be one of the first in the country. It would allow patients at distant locations to have initial and follow-up visits remotely.

Grosberg's approach at Montefiore helped patients so much that many travel long distances to see him. He expects that, in a similar way, patients will seek care from the Hartford HealthCare Headache Center. “Connecticut will be a destination site for headache care for patients in the state and beyond,” Grosberg says.

Comprehensive Care for Movement Disorders

Hartford HealthCare’s Movement Disorders Center, part of the Neuroscience Center, focuses on the wide-ranging needs of patients whose ability to move is impaired because of abnormalities in the brain and nervous system. Several diseases, such as dystonia (involuntary muscle contractions) and Tourette syndrome (which causes involuntary movements and sounds) are categorized as movement disorders. But the disease that leads most people to seek a neurologist’s care is Parkinson’s disease, says J. Antonelle de Marcaida, MD, medical director of the Movement Disorders Center, located in Vernon, Connecticut.

Parkinson’s disease is a progressive disorder of the nervous system. It typically causes tremors, difficulty moving and muscle stiffness. As the disease progresses, patients develop many other physical, mental and emotional symptoms. While medication can help control symptoms, there is no cure.

De Marcaida, who has been in practice for many years, says the nature of Parkinson’s disease requires intensive, multidisciplinary care.

“This is a challenging field because there are so many aspects of the disease you have to pay attention to,” she says. “Besides the mobility issues, there are blood pressure issues, sleep disorders, urinary difficulties and gastrointestinal issues. There are also cognitive issues and comorbidities such as depression and anxiety.”

As the Movement Disorders Center evolves, it will seek to address this full range of needs. De Marcaida envisions involving neuropsychologists; patient and family counselors; physical, occupational and speech therapists; dieticians; gastroenterologists and, eventually, neurosurgeons trained in deep brain stimulation, a procedure in which electrodes are placed on the brain and then activated to reduce symptoms. Exercise, especially dancing, is helpful for Parkinson’s patients, and de Marcaida hopes to make those options more available to patients. The center also will focus on educating staff in skilled-nursing facilities about the unique needs of patients with Parkinson’s.

De Marcaida has been drawn to caring for those with Parkinson’s since she was a resident, and she has great affection for her patients. “They are wonderful people,” she says, “and they have a disease that’s unforgiving.”

Surgical Treatment for Epilepsy

Hartford Hospital’s Epilepsy Center has a well-deserved reputation for excellence, says Medical Director Lawrence Hudson, MD, and its capabilities are expanding.

“When people come here, they soon will be able to obtain the full range of diagnostic and treatment services they would find in the best comprehensive epilepsy centers in the country,” Hudson says. He notes that the center’s attributes include five fellowship-trained neurologists who specialize in epilepsy care, a full-time clinical psychologist, a superb technical staff, and state-of-the-art technology for video EEG (electroencephalogram) monitoring for the diagnostic evaluation of seizure disorders.

Recently, the center developed an Epilepsy Surgery Program to treat the roughly one-third of patients whose epilepsy isn’t controlled by medication. Surgery has long been effective in eliminating seizures caused by brain abnormalities such as tumors. The new program makes it possible to operate on patients whose structural abnormalities are more complex, or whose brains are structurally normal, in order to relieve their epilepsy.

The process begins with placing intracranial electrodes on the surface of the brain to locate electrical abnormalities that can’t be detected from the scalp.

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Placement of these electrodes makes it possible to do functional mapping studies to locate areas of the brain that are important to brain functions such as speech and voluntary movement.

Ultimately, two maps are created: one that shows the distribution of electrically irritable, seizure-generating tissue within the brain, and another that shows functional areas. With this knowledge, surgeons can remove brain tissue that generates seizures without removing or damaging functionally important areas of the brain. The time between placing the electrodes and performing surgery may be one to three weeks.

“We are in an era when brain surgery no longer requires removing a large part of the skull and exposing unnecessary brain,” says Brendan Killory, MD, director of Epilepsy and Functional Neurosurgery.

As with most neuroscience initiatives, epilepsy treatment requires a team approach.

“The treatment of epilepsy in general — and epilepsy surgery in particular — is a very cooperative, multidisciplinary process,” Hudson says. He stresses that everyone — he; his colleagues in neurosurgery, neuropsychology and neuroradiology; and the technical staff — are critical to the success of a procedure. “It involves a team of as many as a dozen people who are engaged in various tasks to ensure the process will be both effective and safe,” Hudson says.

**Complete Care for Stroke**

The Stroke Center is an example of the comprehensive, “patient-centered” care the Neuroscience Center provides. It was the first center in New England certified by the Joint Commission as a Comprehensive Stroke Center, and the program is still the only one of its kind in Connecticut. “This certification means we are part of an elite group of hospitals that have a team of specialized providers who are dedicated to complex stroke care,” says Isaac Silverman, MD, medical director of the Stroke Center.

Hartford Hospital is the largest stroke center in New England, treating more than 800 patients a year. Every one of those patients can expect what Outpatient Stroke Center Medical Director Amre Nouh, MD, calls a “360-degree experience.” Hartford Hospital, Nouh says, is “taking the definition of a comprehensive stroke center to the next level” by providing a complete continuum of expert care, from the moment a stroke occurs through to treatment, recovery, complication management, rehabilitation, secondary-stroke prevention and reintegration to daily life.

“With a team that includes subspecialists in vascular neurology, vascular neurosurgery, endovascular neurosurgery, neurocritical care medicine and neuroscience nursing, we have the capability to care for the sickest stroke patients,” says Silverman. “We offer the access they need at both the emergent, acute stages of their disease and during long-term outpatient clinical decision-making for their future.”

When the stroke is caused by a clot blocking a blood vessel in the brain, the stroke team is ready with medication to dissolve the clot or interventional procedures that physically retrieve the clot. The patient is then closely monitored in the neuro intensive care unit. But the story doesn’t end once the emergency is over and the patient is sent home.

The Outpatient Stroke Center provides ongoing aftercare, helping patients with complications that may include cognitive impairment, physical disability, swallowing problems, depression, headache and more. Clinic staff link patients to all specialized services needed, coordinate their care, monitor progress and manage medications. They also work to prevent future strokes.

“Once someone’s had one stroke, they’re at increased risk of having another one,” Nouh says. “Up to one in every four strokes in the United States occurs in a patient who’s had a previous stroke.” Nouh and his team work with patients to address risk factors such as high blood pressure, high cholesterol and heart problems that may contribute to stroke. They advise patients about lifestyle modifications that can reduce risk. “Patient education is a strong component of what we do regarding these conditions,” Nouh says.

Hartford Hospital’s Telehealth Network brings world-class emergency stroke and critical neurology care to hospitals that may lack around-the-clock on-call neurologists or that want to strengthen their primary stroke care services. The network provides stroke and neurology consultative services using advanced telemedicine technology on a 24/7 basis, 365 days a year. With this technology, Nouh says, “The vascular neurologist can consult with the outlying hospital’s Emergency Department team, see the patient, look at the scan and then guide care.”
Bruce Bissonnette is on a mission to help people recognize the signs and symptoms of stroke. Bissonnette, 73, of Manchester, suffered a stroke in November 2014 while he and his wife, Elizabeth, were at a gathering in Haddam. Like most strokes, his was sudden and painless. He was unable to speak or move the right side of his body, and his vision was impaired. Several minutes passed before he realized what was happening to him and alerted friends to call 911. “With stroke,” he says, “you don’t have any pain, so you don’t think it’s anything serious.”

He continued to have strokes while at the local hospital having a CT scan.

Emergency Department physicians arranged for Bissonnette to be rushed to Hartford Hospital’s Stroke Center, where the multidisciplinary Stroke Center team was waiting for him. “Before I knew it, I had seven doctors at my bed, evaluating me,” Bissonnette recalls.

The team determined that Bissonnette had had a “left middle cerebral artery ischemic stroke.” A piece of the plaque that had accumulated in Bissonnette’s carotid artery had broken off and traveled to a blood vessel in his brain, cutting off blood flow. The team worked to stabilize him, administering blood thinners, regulating his blood pressure and monitoring him closely, because he was at high risk of having another stroke.

Bissonnette needed surgery to remove the remaining plaque from his carotid artery, but it wasn’t until his 11th day of hospitalization that the stroke team, which included stroke neurologist Amre Nouh, MD, and vascular surgeons Thomas Divinigracia, MD, and James Gallagher III, MD, determined he was stable enough to undergo the procedure. “The plaque had to be removed, because it could have caused another stroke,” Nouh says.

The surgery was successful, and two days later, Bissonnette was transferred to a rehabilitation facility with orders for speech, physical and occupational therapy. Once at home, he began seeing Nouh regularly in the Outpatient Stroke Center. Nouh adjusts his medications: evaluates his reflexes, vision and range of motion; and works with him on stroke prevention. “Mr. Bissonnette has recovered very well,” Nouh says. “His speech is much improved, his arm strength is great, and he has a new lease on life. He’s lost 35 pounds following the Mediterranean diet we recommended, and he’s exercising regularly. He looks great, and he feels great.”

Bissonnette agrees that he’s feeling good, given all he’s been through. He has joined the hospital’s Stroke Patient Advisory Board. It’s his way of giving back and raising awareness of stroke, because he now realizes “how easy it is to have a stroke and not know you’re having it.” It’s changed him in other ways, too. “I have a new appreciation for life,” Bissonnette says. “I take life a day at a time. And I make sure I’m well aware of my wife, who’s been by my side through this whole thing. I make sure I tell her I love her every day.”

**Recognize and respond to symptoms of stroke FAST**

**Face:** ask the person to smile; does one side of face drop?

**Arms:** ask the person to raise both arms; does one drift downward?

**Speech:** are words slurred?

**Time:** if person shows any of these symptoms, time is important! Call 911.
When it comes to saving lives the SKY IS NO LIMIT
Thirty years ago, LIFE STAR took its first life-saving flight and launched a service that has made Hartford HealthCare a regional leader in trauma and critical care. LIFE STAR now has two helicopters — and three homes: Hartford Hospital, MidState Medical Center in Meriden, and Backus Hospital in Norwich. Having multiple bases ensures short response times to locations throughout Connecticut and beyond.

Over the years, LIFE STAR’s airborne intensive care units have treated and transported more than 30,000 patients, often saving their lives. When speed and skill count, people rely on LIFE STAR and its skilled and dedicated crews to be there quickly.

Living Proof of the Lifesaving Prowess of LIFE STAR

At Hartford Hospital’s Black and Red Gala last winter, a handsome young man, his blonde hair parted just so, his tux crisper than James Bond’s, circulated among the cocktail-party crowd and paused for an interview with reporters broadcasting live from the event. He could have been an entertainer or a celebrity guest. But he wasn’t.

William O’Brien Jr. was Exhibit A for the lifesaving prowess of LIFE STAR and the trauma team at Hartford Hospital.

In May 2010, O’Brien became one of the 32,000 desperately injured or ill patients whom LIFE STAR has transported to Hartford Hospital in the 30 years since its first flight in 1985.

Although not everybody survives, O’Brien became one of the many who has lived to say “thank you.” O’Brien was 19 and had just finished his freshman year at UConn. He was driving home from his summer job when he crashed into a highway retaining wall, crushing the cab of his truck. He had multiple broken bones and was bleeding profusely. Time was the enemy. His only chance was getting to the trauma center at Hartford Hospital — fast.

Within seven minutes of receiving the call, LIFE STAR took off from the helipad at Hartford Hospital, with a pilot, a flight nurse and a flight respiratory therapist aboard.

Carrying the same state-of-the-art equipment and expertise found in any ICU, the crew was able to start treating O’Brien even before they lifted off for the return flight.

About one-third of LIFE STAR’s calls are for trauma patients such as O’Brien, often the victims of horrible accidents. The rest are for sick patients such as cardiac, stroke or pediatric patients who must be transported from one hospital ICU to another to ensure the best care.

“We deliver critical care when and where it is needed most,” said Dr. Kenneth Robinson, director of LIFE STAR. “Every day, we have the honor and privilege of saving lives.”

O’Brien, now 24, has relearned how to walk, talk and play guitar and piano, activities he took for granted before he was injured. His parents, Lisa and William Sr., have gotten their son back. And they could not be more grateful.
The condolences describe a vibrant woman: devoted and loving, kind and generous, compassionate and caring. “She made our hearts smile!”

Dedicated to her husband and three children, Mary Thomson Russell touched the lives of her family and friends in meaningful ways. “She was generous with her time, she was generous with an encouraging word, she was generous when someone was in need,” says her husband, Douglas Russell, who is a senior vice president at MassMutual Financial Group. “She was also the most selfless person I knew — thinking of the other person first and always. And it did not matter whether you were a family member, a great friend or merely an acquaintance.”

Mary Thomson Russell was just 47 when she was diagnosed with thymoma, a rare cancer affecting the thymus that can be a challenge to cure. “When localized, it frequently can be treated successfully with surgery and radiation therapy,” says Andrew Salner, MD, medical director of the Hartford HealthCare Cancer Institute at Hartford Hospital. “When more advanced, the treatment options are not as effective.”

For six years, Mary Thomson Russell “fought a graceful battle” against the disease, Russell says. “She lived successfully with her cancer because of physicians like Dr. Salner, Dr. Robert Lowe, Dr. Robert Siegel and Dr. Jack Foster, and the quality of care they provided.”

That quality of care was one of the factors Russell considered when he decided to establish the Mary Thomson Russell Endowed Cancer Research Fund at Hartford Hospital. The permanent endowed fund will provide support for critical molecular oncology research to identify new targeted therapies for patients diagnosed with more common cancers, such as breast, colon, lung and prostate, as well as for patients with unique cancers like Mary’s.

“What makes funding this research appealing is the personal way it connects to Mary, the type of cancer that she had, and where the research is going,” Russell says. “We’re moving into a world where targeted types of treatment will grow. This fund will be able to make a difference.”

As the charter member of the Memorial Sloan Kettering Cancer (MSK) Alliance, the Hartford HealthCare Cancer Institute is working to bring cancer patients in Connecticut unprecedented access to breakthrough research and innovative treatment options. An important focus of the research relationship will be active participation in molecular oncology tailored research studies.

“Many of our new clinical trials will look for unique molecular fingerprints in cancer cells that can be matched to a new targeted therapy,” Salner says. “These trials will focus on identifying these particular patients and developing a personalized treatment for them. They are not based on cancer type — i.e., breast or lung cancer — as we have traditionally based our clinical trials, but rather, on unique molecular signatures.

“We are just beginning to open MSK trials here,” Dr. Salner says. “We hope that the molecular trials will be open later this year. While we have various funds that support the cancer center and research, the [Mary Thomson Russell Endowed Cancer Research Fund] is clearly the beginning of our effort to support this unique and exciting research.”

The Russell family’s relationship with Hartford Hospital is longstanding. “All our children were born at Hartford Hospital,” Russell says. “Over time it became an organization that we gave to. As time went on, we started to give a little more. We give because of our commitment to care and our involvement in the community. Both of Mary’s parents had cancer. The Helen & Harry Gray Cancer Center-Avon gave them great care. ... And when Mary was diagnosed, she was treated in the room that had our name on it.

“It is important for our community to understand just how talented and capable the doctors we have in our own backyard are,” says Russell, who has been a Hartford Hospital corporator since 2002. “With Memorial Sloan Kettering, Hartford Hospital has an opportunity to become even more pre-eminent.”
We welcome some of the newest members of our Hartford Hospital Medical Staff. For more information on these and other physicians, visit our website at www.harthosp.org or call the Health Referral Service at 860.545.1888.

**Kwame Asante, MD**
Kwame Asante, MD, has joined Hartford Hospital’s Physical Medicine and Rehabilitation Department. Dr. Asante is a graduate of Brandeis University. He completed his residency training at Moss Rehabilitation and Temple University Hospital and is board-eligible in Physical Medicine and Rehabilitation.

**Phyllis G. Grable-Esposito, MD**
Phyllis G. Grable-Esposito, MD, has joined the Department of Neurology at Hartford Hospital. She is a graduate of Harvard University and Tufts University School of Medicine. She completed a fellowship and her residency at Brigham and Women’s Hospital and Massachusetts General Hospital. She is board-certified in Neurology, Neuromuscular Medicine and Electrodiagnostic Medicine.

**John J. Huang, MD**
John J. Huang, MD, has joined Hartford Hospital’s Ophthalmology Department. Dr. Huang earned his medical degree from Johns Hopkins University School of Medicine. He completed his residency training at the Manhattan Eye, Ear and Throat Hospital/New York University Medical Center and fellowship training at Johns Hopkins Hospital Wilmer Eye Institute in vitreo-retina disease and at the Massachusetts Eye, Ear Infirmary/Harvard Medical School in uveitis and is board-certified in Ophthalmology.

**Michael LeMay, MD**
Michael LeMay, MD, has joined Hartford HealthCare Medical Group and Hartford Hospital’s Department of Medicine. Dr. LeMay is a graduate of the University of Hartford and University of Connecticut and earned his doctorate of medicine at the American University of the Caribbean. He completed a residency program through the University of Connecticut School of Medicine and fellowship training in endocrinology, diabetes and metabolism at Baystate Medical Center. He is board-certified in Internal Medicine and Endocrinology, Diabetes and Metabolism.

**Lisa Mack, MD**
Lisa Mack, MD, has joined Hartford Hospital’s Obstetrics and Gynecology Department. Her special interests include minimally invasive gynecologic surgery including laparoscopic and robotic surgery. She is a graduate of Boston University and received her doctorate of medicine at Virginia Commonwealth University.

**Jaime P. Moskowitz, MD**
Jaime P. Moskowitz, MD, has joined Hartford HealthCare Medical Group and Hartford Hospital’s Department of Internal Medicine. She is a graduate of Manhattan College and Ross University School of Medicine. She completed her residency at St. Mary’s Hospital in Waterbury, CT and is board-certified in Internal Medicine.

**Jozsef Piri, MD**
Jozsef Piri, MD, has joined the Department of Internal Medicine at Hartford Hospital. He is a graduate of San Francisco State University and the University of Debrecen School of Medicine. He completed his residency training at the University of Connecticut and is board-certified in Internal Medicine.
Cancer Support, Integrative Medicine and Exercise ..........................................................
www.harthosp.org/Cancer/Classes

Cancer Education and Support
• Bladder Cancer, Kidney Cancer: held quarterly at rotating locations. Contact Amy Reynolds, 860.696.4021.
• Brain Tumor: held monthly at rotating locations. Contact Erin Mangan, 860.972.5808.
• Lung Cancer: held monthly at rotating locations. Contact Barbara Gaughan, 860.972.5807 or Noa Mencher, 860.696.4814.
• Prostate Cancer: held monthly at rotating locations. Contact Amy Reynolds, 860.696.4021.

Look Good, Feel Better
For women undergoing cancer treatment, offered in English and Spanish. Learn supportive techniques on skin, makeup, and hair care from a licensed cosmetologist. Free, non-medical, product-neutral program offered in partnership with the American Cancer Society. Contact Mary Ann Vanderjagt, 860.972.4184.

Healthy Steps Lebed Method
An effective therapeutic program of exercise and movement to music for women who have experienced breast cancer or other cancers. Meets weekly at multiple locations. Contact Sharon Mucahy, 860.324.8143.

Integrative Medicine
Integrative Medicine offers massage therapy, acupuncture and Reiki on-site at multiple locations throughout Hartford Healthcare Cancer Institute. Contact 860.972.4444.

Smoking Cessation
Offered at multiple locations. Contact Carol Barrett, 860.972.5776

Yoga for Cancer Survivors
This free program meets weekly at West Hartford Yoga. Contact Nina Fox, 860.953.9642

Healthy Hearts ....................................................

Individual Cessation Counseling
Recommended for individuals who would benefit from a personalized, one-on-one treatment approach to learn about behavioral strategies, medication options and counseling support. Sessions are offered in West Hartford. Call 860.972.5864 for more information.

Mended Hearts Support Group
For people who have had open-heart surgery or heart disease and their partners. Hartford. Call 860-688.5489. FREE.

Surgical Weight Loss Programs
www.harthosp.org/obesitysurgery/Classes ............

Surgical Weight Loss: General Education Session
An information session for individuals who are ready to start the program or want to learn more about surgical weight loss. You will meet the bariatric surgeons and other members of the team. Several locations are available. Registration is required. To register, call 860-246-2071, option #2 or see schedule online at www.harthosp.org/obesity-surgery. Parking will be validated. FREE.

Surgical Weight Loss: Support Group
Education and support for those who have had or are thinking of having bariatric weight loss surgery.
Facilitated by members of the surgical weight loss program. Offered in Hartford and Enfield. Registration is not required. Schedule is available online at www.harthosp.org/obesitysurgery.

**Surgical Weight Loss: Nutrition Workshop**
A nutrition class for individuals who have already had bariatric surgery. Run by registered dieticians from the surgical weight loss program. Registration required. For information and to register call Hartford Hospital Food and Nutrition Services at 860.972.2604.

**Women’s Health Issues**
www.harthosp.org/women/Classes

**The Strong Women Program**
Working with weights increases strength, muscle mass and bone density while reducing the risk of numerous chronic diseases. Twelve-week sessions meet twice a week for “no-impact” workouts. Schedule and registration available online at www.harthosp.org/classes. FEE: $160.

**Parent Education Classes**
www.harthosp.org/ParentEd
Registration is required for all classes. Some classes may close registration 48 hours prior to the beginning of class so please register early.

- **Twin Preparation Class**
  This three-part series will cover the unique needs of parents delivering and caring for multiples. Expectant parents may invite extended family members to attend any of the classes. FEE: $125/3 sessions (may be prorated).

- **Baby Care**
  Understand the needs of your newborn and learn great tips on diapering, bathing and general care. FEE: $25/couple.

- **Breastfeeding With Success**
  Before the baby arrives, learn about the basics and benefits of breastfeeding. FEE: $25.

- **Breastfeeding And Returning To Work**
  We’ll help you by covering such topics as choosing the right breast pump, collecting and storing milk and setting a routine. Babies are welcome. FEE: $25.

- **Cesarean Birth**
  This class prepares you for the experience from pre-admission through recovery at home. Learn what to expect during surgery and throughout your hospital stay, how your partner can help, and tips for a smooth recovery while caring for a newborn. Includes a maternity tour at Hartford Hospital. FEE: $50.

- **Expectant Grandparents Class**
  Provides grandparents with an opportunity to talk with trained professionals about birthing changes, baby care, infant feeding and safety. FEE: $5/person.

- **Pups And Babies**
  Get tips on preparing your pet for baby’s arrival, introducing baby to your pet and helping your pet understand his new place in the expanded pack. FEE: $25/couple.

- **Baby Signing: An Introduction**
  Led by a pediatric nurse practitioner, this class focuses on how your child develops language and speech, and how sign language can enhance family communication. For babies 6 to 24 months. FEE: $25.

- **Maternity Tours**
  A guided tour to acquaint you with our facility and maternity services. Tours available in English and Spanish. For schedule and to register, visit www.harthosp.org/ParentEd. FREE.

- **Neonatal Intensive Care Unit Tours**
  Private tours for those expecting twins, triplets, etc. By appointment only. Please call 860.545.8987. FREE.

- **eLearning Childbirth Education**
  When traditional childbirth education classes are not a possibility due to bed rest or time constraints, our interactive web-based program provides a solution. Call 860-545-1888. FEE: $100.

- **Preparation For Childbirth**
  Topics include: stages of labor, relaxation, breathing techniques, pain management options and coping skills. Learn to be an active participant in the birth of your baby. Go to www.harthosp.org/ParentEd for schedule and to register. FEE: $100.

- **The Happiest Baby**
  Learn approaches to keeping babies happy by helping them sleep better and soothing even the fussiest baby in minutes. FEE: $65/couple includes class, Parent Kit, choice of Dr. Karp’s DVD (or VHS) and Soothing Sounds CD.

- **Epidural Anesthesia For Labor**
  Led by a board-certified anesthesiologist, this class covers what an epidural is, the risks involved and what to expect for pain relief. FREE.

- **Comfort Measures For Labor**
  Led by a certified labor doula/licensed massage therapist, this interactive class will help expectant
couples practice and master hands-on techniques to address the discomforts of labor, including relaxation, positioning, movement and touch. FEE: $35.

- **Sibling Preparation**
A class to help children prepare for the arrival of a new baby brother or sister. FEE: $15 per child; $25 for 2 or more children.

**Nurturing Connections ..............................**
*(Provided by the Nurturing Families Network)*

- **Telephone Support For New Parents**
Volunteers provide education and support when the mother is pregnant or while mother and baby are still in the hospital. Contact Leslie Escobales at 860.972.3201.

- **Home Support For New Parents**
Starting prenatally until the baby is 5 years of age, home visitors act as teachers, supporters and advocates and help families obtain community services. Contact Leslie Escobales at 860.972.3201.

- **Lactation Feeding Consultant**
The goal is to offer mothers the information, confidence and skills needed to successfully initiate and continue breastfeeding their babies or feeding formula safely. Contact Mary A. Marshall-Crim at 860.972.1313.

- **Prenatal Groups**
Offered in both English and Spanish depending on the number of participants. Meet once per week for ten weeks. Contact Damaris Rodriguez at 860.972.3131.

**Parent–Baby Series**

- **Enjoying Infants Together**
Led by a pediatric nurse practitioner, this six-week series is for parents and infants younger than 12 months. Learn fun, developmental activities for infants, participate in discussions and make new friends. FEE: $50 for 6-week series.

- **Time For Toddlers**
Led by a pediatric nurse practitioner, this series is for parents and toddlers, 12 to 24 months. Learn fun, developmental activities for toddlers and participate in discussions. FEE: $50 for 6-week series.

- **Time For Infants & Toddlers — Saturdays**
This series is for parents and children under 24 months. Learn fun, developmental activities, participate in discussions and make new friends. FEE: $15/class.

**Exercise for Expectant and New Moms**

- **Prenatal Yoga**
Improve your strength and muscle tone, ease tension and relieve discomforts of pregnancy. FEE: $50/4-week session.

**Safety Education .................................**

**Car Seat Safety**
Four out of five car seats are installed incorrectly. That’s why we offer a free Car Seat Safety class for expectant parents, hosted by a Community Safety officer. Space is limited and registration is required. West Hartford. FREE.

**CPR For Family And Friends: Infants And Children**
Recommended for new parents, babysitters and anyone who cares for infants and children who want basic first aid and CPR information but who do not need a course completion card. This is a non-certification informational class intended for home use only. Hartford. FEE: $45.

**Mental Health .................................**
*www.harthosp.org/InstituteOfLiving/Events*
The following free programs are conducted by staff from the Family Resource Center at the Institute of Living. Meetings take place at 200 Retreat Avenue on the first floor of the Center Building unless indicated otherwise. Registration is not required unless noted. For additional information, directions or dates, visit [www.harthosp.org/InstituteOfLiving/Events](http://www.harthosp.org/InstituteOfLiving/Events).

**Myths, Minds And Medicine Exhibit**
A permanent exhibition on the Institute of Living’s history and the treatment of psychiatric illnesses. Self-guided tours Monday through Friday, 9:00 a.m. to 5:00 p.m. FREE. By appointment only; contact Gina, 860.972.4500

**Anxiety Disorders Group**
Group cognitive behavioral therapy for children and adolescents with anxiety concerns such as panic attacks, social anxiety and excessive worrying. Facilitated by licensed psychologists with expertise in anxiety treatment. Call 860.545.7685, option #3 for schedule. Registration is required. Billable to insurance and co-pay.

**Bipolar Disorder — An Introduction**
This program is for family members and friends of individuals who have bipolar or a related disorder. Registration not required. FREE.

To see a complete listing of classes, or for more details, please visit [www.harthosp.org/calendar](http://www.harthosp.org/calendar).
Schizophrenia — Introduction To The Disorder
Learn about schizophrenia and its treatment, with specific suggestions to help family and friends cope. FREE.

Introduction To Mental Health Benefits And Services For Severe Mental Illness
Overview of benefit programs available for individuals with mental health disabilities. FREE.

Depression: An Introduction To The Disorder
This program is for family members and friends of individuals who suffer from depression. Contact Mary Cameron at 860.545.7665 for more information and dates. FREE.

Managing Schizophrenia
This presentation will discuss the impact that symptoms of schizophrenia have on everyday activities and how to make things better at home. FREE.

Dementia Support/Educational Group Meeting
Please join us as we bring together experts and those who want guidance, direction and support through this journey. Let’s work together, help each other and exchange ideas. Space is limited — reservations are required, 860.545.7665.

Mental Health Peer Support Group
Provides support, encouragement and positive momentum for people in recovery from mental health issues and substance use. Call 860.545.7202 for more information. FREE.

Support Group For Families Dealing With Major Mental Illness
Share your successes and struggles in loving and living with someone who has schizophrenia. FREE.

Peer Support Group: Schizophrenia Anonymous (S.A.)
This is a peer-run, open forum group meeting providing support to people with a diagnosis of schizophrenia. FREE.

Social Support Group — LGBTQ Issues (Lesbian/Gay/Bisexual/Transgender/Questioning)
Support group for 16-23 year-olds who identify LGBTQ issues as being prominent in their lives. The goal is to discuss support strategies to manage life challenges. FREE.

Support Groups
Visit www.harthosp.org/supportgroups for a full listing of support groups with dates, times and locations.

Volunteers
www.harthosp.org/Careers/Volunteer
If you are interested in giving your time and talent, we offer a wide variety of opportunities to serve our patients, families, visitors and staff. Applications are available online. Training and free parking are provided. For more information, call Volunteer Services at 860.972.2198 or online at www.harthosp.org/volsvc.

Bone & Joint Institute
Volunteers are needed to make follow-up calls to discharged patients and for assistance in the busy outpatient office. Bilingual a plus. Call Volunteer Services at 860.972.2198.

Reiki Volunteers
Hartford Hospital’s Integrative Medicine Reiki Volunteer Program is looking for additional Reiki volunteers. In this volunteer role, you will assist patients, families, and staff with a gentle, hands-on relaxation technique that can reduce stress and pain and help promote a greater sense of well-being. A six-month commitment of one four-hour shift per week is required. If interested, email eileen.pelletier@hhchealth.org.

Pet Therapy Volunteers
Certified Pet Therapy teams are needed as visitors on Hartford Hospital’s inpatient units, in the lobbies as greeters and at the behavioral health campus — Institute of Living and Grace Webb School.

MAKOplasty™ Knee and Hip Replacement
Hartford Hospital now offers MAKOplasty™, a robotic-assisted surgery for partial knee and total hip replacement. This surgery is so precise that people recover faster with fewer side effects, and can rapidly return to a more active lifestyle. Information sessions are scheduled regularly. For more information, call 866.633.2229.

To see a complete listing of classes, or for more details, please visit www.harthosp.org/calendar.
Fish Tacos

Ingredients
• 1 ½ lbs. halibut
• 1 tsp. ground cumin
• ½ tsp. smoked paprika
• ¼ tsp. cayenne pepper
• ¼ tsp. garlic powder
• ½ tbsp. canola oil
• 8 6-inch corn soft taco shells
• 2 cups shredded green and purple cabbage

Crema
• 3 tbsp. mayonnaise
• 3 tbsp. plain yogurt
• ¼ cup finely sliced scallions
• ¼ cup chopped fresh cilantro
• 1 tsp. grated lime rind
• 1 ½ tsp. lime juice
• 1 minced garlic clove

Optional garnishes: sliced avocado, lime wedges and more fresh cilantro

Directions
• Combine the spices together in a bowl with the oil. Rub gently into the fish on all sides and let stand for 15 minutes in the refrigerator while preparing the crema.
• Combine all the crema ingredients together and refrigerate.
• Grill the fish (you can use foil) on both sides to mark it and cook it through.
• Heat the corn tacos according to package directions or grill briefly on both sides.
• Divide the fish among the 8 tacos and add ¼ cup of shredded cabbage to each. Top with a tablespoon of the crema. Garnish with lime wedges, avocado slices and fresh cilantro.

Serves 4. 2 tacos each serving.

1 serving (2 tacos) provides the following:
527 Calories
42 g Carbohydrate
29 g Protein
27 g Fat
7 g Fiber
4 g Saturated fat
5 g Polyunsaturated fat
15 g Monounsaturated fat
1864 I.U. Vitamin D