

INGALLS Progress

SPRING 2014
ANNUAL REPORT ISSUE

AMERICA'S
**50 BEST
HOSPITALS**

2014

★★★★★
healthgrades



Ingalls Celebrates 90th Anniversary With Our First Baby

Cutting-Edge Sinus Surgery—With No Cutting

Promising New Leukemia Drug

Infusion Center Opens in Flossmoor for Patients
of All Types

 Ingalls

Letter to the Community

As with most things in life, to get what you really want, you need to ask for it.

As healthcare consumers, we tend to ask a lot of questions.

In the midst of all these questions and considerations regarding your health, do you remember to ask for Ingalls...by name?

Here's why you should.

In February of this year, Ingalls was named among the nation's 50 Best Hospitals by Healthgrades, the leading online resource for comprehensive information about physicians and hospitals. This extraordinary distinction places Ingalls in the top one percent of hospitals nationwide, out of more than 4,500 hospitals evaluated.

Added to that, for the eighth year in a row, Ingalls received the Healthgrades Distinguished Hospital Award for Clinical Excellence and was cited for excellence in 28 distinct clinical areas, including heart care, orthopedics, women's health, gastrointestinal care, emergency medicine and many more.

These designations highlight superior clinical outcomes across a broad spectrum of care. Healthgrades has analyzed this data for more than 15 years and has found that there are hospitals that repeatedly differentiate their performance from their peers. Ingalls is one of them.

According to Healthgrades, if all hospitals performed at the level of Ingalls, more than 150,000 lives could have been saved nationwide between 2010 and 2012.

Our team of caregivers has demonstrated a unique ability to sustain superior performance year after year. Ingalls has one of the lowest surgical infection rates in the state, exceptional

scores on critical quality-of-care measures, and is committed to providing the best patient experience possible.

In the last year alone, we have made tremendous strides to enhance patient care by:

- Dramatically reducing emergency department wait times
- Strengthening our clinical offerings by renovating our entire cardiovascular area
- Adding new specialists to our medical staff
- Introducing a new family care clinic in Crestwood
- Expanding our outpatient infusion services to three convenient locations
- Offering even more investigative treatments for patients with cancer

And we back it up with decades of experience you can count on. Last year, we celebrated our 90th year of serving the South Suburbs.

But, at Ingalls, we're not content to rest on that—or any other—achievement. We're constantly striving to find new and better ways to serve you and improve your health.

People from communities across the South Suburbs are making Ingalls their top choice when they need superior healthcare services. You can, too.



Kurt E. Johnson
President and CEO
Ingalls Health System



Eugene M. Feingold
Chairman, Board of
Directors
Ingalls Health System

One of Healthgrades America's 50 Best™ in 2014



Ingalls Memorial Hospital is proud to be named among the nation's 50 Best Hospitals by Healthgrades, the leading online resource for comprehensive

information about physicians and hospitals. This impressive distinction places Ingalls in the top one percent of hospitals nationwide, out of more than 4,500 hospitals evaluated.

"Ingalls is proud to be recognized among the top one percent of U.S. hospitals for consistent quality care," said Kurt Johnson, Ingalls President/CEO. "Our team has demonstrated a unique ability to sustain that performance year after

year. It's one more reason our patients can rest assured they are in the best hands when they come to Ingalls."

The America's Best designation focuses on the ongoing accomplishment of superior clinical outcomes across a broad spectrum of care. Healthgrades has analyzed this data for more than 15 years and has found that there are hospitals that repeatedly differentiate their performance from their peers. Ingalls is one of them.

"By choosing a hospital that has achieved the Healthgrades America's 50 Best™ hospital award, consumers can expect a long-standing commitment to exceptional clinical care," Johnson added.

In addition, for the eighth year in a row, Ingalls has been named a recipient of the Healthgrades Distinguished Hospital

Award for Clinical Excellence. In all, Healthgrades cited Ingalls for excellence in 28 distinct clinical areas, including heart care, orthopedics, women's health, gastrointestinal care, emergency medicine and more.

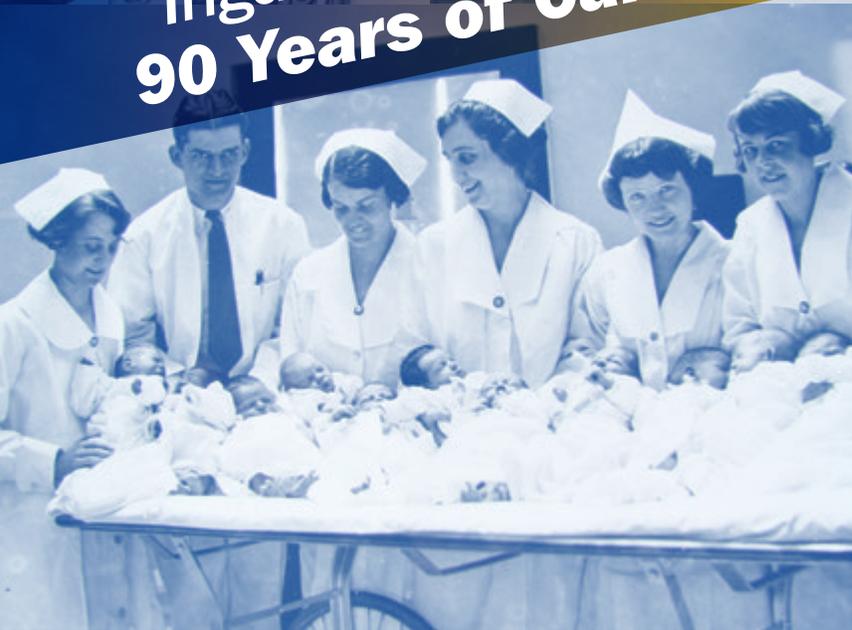
In 2013 alone, Ingalls made great strides in improving patient care by dramatically reducing emergency department wait times, lowering infection rates, raising patient-satisfaction scores in virtually every category, and strengthening clinical services by undertaking a massive renovation of its cardiovascular services and adding new specialists to its medical staff.

For more information about Ingalls recognition by Healthgrades and other news stories, please scan this code with your smartphone.





Ingalls Celebrates 90 Years of Caring



On the cover: The first baby ever born at Ingalls—Jeannette Landowski of Glenwood—visited the maternity unit to celebrate her 90th birthday. She is shown here greeting baby Jacob of Flossmoor, the first baby born at Ingalls on her 90th birthday. His mom Katie Linzey is on the left, maternity unit manager Glynis Adams, RN, is center, and supervisor Patti Schassburger, RN, is on the right. Jeannette was honored to be named after Jeannette Hess Ingalls, wife of the hospital's founder Frederick A. Ingalls.

Ingalls Annual Report FY 2013

Operating Expenditures (in thousands)	FY 2013
Our People	\$158,208
Patient Care Supplies & Other	105,274
Purchased Services	46,966
Provision for Uncollectible Accounts	28,968
Depreciation	17,572
Medicaid Provider Assessment	9,933
Insurance & Self Insurance Program	11,749
Amortization & Interest	5,019
Total Operating Expenditures	383,690
Capital Investments	18,522
Charity Care & Community Service	
Charity Care based on Charges Forgone	7,983
Excess of Cost over Reimbursement for Medicaid Patients	15,926
Community Service Provided, at Cost	1,179
	25,088
Patient Care Services Summary	
Admissions	15,338
Inpatient Days	73,210
Births	1,013
Emergency Department Visits	49,771
Outpatient Visits (excluding ER)	329,848
Home Health	
Intermittent Care Visits	46,197
Private Duty Hours	112,544
Hospice Days	16,240
Surgeries	
Inpatient	2,824
Ambulatory	4,124

Welcome New Doctors to the Neighborhood



ANIL KESANI, M.D., recently joined Ingalls medical staff. A graduate of Royal Free Hospital School of Medicine (England, UK), he completed a residency in orthopedic surgery at University of Medicine & Dentistry of New Jersey (Newark, NJ) and a fellowship in orthopedic and spine surgery at University of Western Ontario (London, Ontario). Board-certified in orthopedic surgery, Dr. Kesani is a member of Southland Orthopaedics, Ltd.



SARAH MAHOWALD, D.P.M., recently joined the Ingalls medical staff. A graduate of Dr. William M. Scholl College of Podiatric Medicine, Dr. Mahowald completed a three-year residency program in advanced foot and ankle surgery at the Veteran's Administration Chicago Healthcare System, where she also served as Chief Resident in Podiatric Surgery. She is a member of Foot & Ankle Associates, Ltd. in Oak Lawn, IL.



GABRIELLE MYKONIATIS, M.D., is a board-certified internal medicine physician who recently joined the Ingalls medical staff. Dr. Mykoniatis is a graduate of the Medical College of Wisconsin and completed her residency at University of Cincinnati Medical Center. Dr. Mykoniatis sees patients in Matteson, IL.

For more information about physicians on staff at Ingalls, or to make an appointment with any of the physicians listed, please call the Ingalls Care Connection at 708.915.CARE (2273), or visit us at Ingalls.org.



Dawn Monk is surrounded by some of her infusion center care team—Joanne, Mary Kay and Lisa.

Winning the Battle with Crohn's Disease

“It’s like being on a see-saw,” Dawn Monk says of her 27-year odyssey with Crohn’s disease. “When it’s under control, I feel great; when I have a flare, I have a lot of joint pain, abdominal discomfort and dehydration. My weight goes up and down.”

Crohn’s is one of a group of disorders collectively referred to as inflammatory bowel disease (IBD), and it causes painful inflammation of the digestive tract. Although it may occur at any age, Crohn’s most often appears in both men and women between the ages of 15 and 30, and tends to run in families.

Dawn was diagnosed with Crohn’s in 1987, has been hospitalized numerous times and undergone three surgical procedures as a result of the condition’s debilitating symptoms.

“The inflammation caused by Crohn’s disease often spreads deep into the layers of affected bowel tissue,” explains

gastroenterologist Robert Kaiser, M.D. “Like ulcerative colitis, another common IBD, Crohn’s disease can be both painful and debilitating, leading to abdominal pain, severe diarrhea and even malnutrition.”

If not treated, Crohn’s can lead to life-threatening complications.

While there’s no known cure, therapies can greatly reduce the signs and symptoms and put the condition in long-term remission.

Though she’s had her share of ups and downs, the Harvey woman is in remission thanks to the drug Remicade, a biologic medication that works to block a protein in the body that leads to inflammation and the painful symptoms of Crohn’s.

Dawn visits the Ingalls Outpatient Infusion Center in Harvey every eight weeks for Remicade treatment.

“The Infusion Center is just five minutes from my home, so it’s very convenient for me,” she adds. “The infusion team is excellent; the nurses answer all my questions, and the Remicade has helped tremendously.”



Ingalls outpatient infusion services provides added capacity with recent expansions in Tinley Park and Flossmoor.

“The Infusion Center is just five minutes from my home, so it’s very convenient for me,” Dawn Monk adds. “The infusion team is excellent; the nurses answer all my questions.”

A registered nurse, Dawn plans to pursue a B.S.N. degree and hopes to work with Crohn’s disease patients when she finishes. “It isn’t always easy to live with Crohn’s disease, but I’ve got a very supportive family and friends, and I attend church, which helps a lot too,” she added.

Symptoms of Crohn’s Disease

Signs and symptoms of Crohn’s disease can range from mild to severe, and may develop gradually or come on suddenly, without warning. A person may also have periods of time when they have no signs or symptoms (remission).

When the disease is active, signs and symptoms may include:

- Diarrhea
- Abdominal pain and cramping
- Blood in the stool
- Ulcers
- Reduced appetite and weight loss

See your doctor if you have persistent changes in your bowel habits or if you have any of the signs and symptoms of Crohn’s disease.

For more information or a referral to a gastroenterologist, call Ingalls Care Connection at 708.915.CARE (2273).

Infusion Services Expand in Tinley Park and Flossmoor

Ingalls has just completed a major expansion of outpatient infusion services. There are now 12 chairs in the renovated site in Tinley Park and another 12 in the newly constructed, customized site of Ingalls Outpatient Infusion Center in Flossmoor. Also expanded were the adjacent offices of Primary Health Oncology, offering seamless coordination of patient care.

Now, in addition to the infusion services utilized by cancer patients, all other patients who benefit from infusion therapy can receive Ingalls state-of-the-art care provided by experienced, skilled medical professionals in a comfortable environment that includes warm blankets, internet service and individual flat screen TVs.

Dozens of conditions from anemia to ulcerative colitis require that medication be administered by infusion therapy...liquids given through an intravenous drip method. Services include blood transfusions, IV antibiotic therapies, hydration and electrolyte replacement, and many others.

All sites offer on-site lab and pharmacy; convenient, free parking, and assistance with any billing and insurance verification questions. Cancer Clinical Research nurses are available for consultations and monitoring as needed.

With added capacity and three sites, our nurses can work with every physician and patient to find the most convenient schedule and location. The Ingalls infusion therapy team works seamlessly with all referring physicians, whether or not they are on the Ingalls Medical Staff, to ensure that medications are delivered safely and efficiently.

For more information, call 708.915.5032.

Right Time, Right Place: Man's Life Saved in Doctor's Waiting Room

The morning began ordinarily enough for then 65-year-old retired school psychologist Stephen Rinkenberger of Homewood, who was scheduled to see his cardiologist that day.

Physically fit and active himself, Stephen knew his family had a history of heart problems though he'd never really had any of his own.

He had, however, experienced a couple uncomfortable episodes in recent months that, within about a minute, left him feeling extremely weak and lightheaded. Both were associated with physical exertion. An angiogram earlier in the year revealed no artery blockages, but doctors were keeping a watchful eye on his aortic valve.

As he walked from the parking garage at Ingalls Memorial Hospital to the office of P. Sandy Sundram, M.D., in the hospital's Professional Office Building, Stephen started to feel strange.

"Something didn't feel right," he remembers. "It was an all-too-familiar feeling."

When he and his wife Pat finally made it into the crowded waiting room, there was one vacant chair, which Stephen knew he needed to sit in right away.

Stephen Rinkenberger (rear, left) and his wife Pat were overwhelmed by the Rapid Response Team at Ingalls, including cardiologists P. Sandy Sundram, M.D., Andy Lin, M.D., and Ripple Doshi, M.D.

That's the last thing he remembers.

When he came to minutes later, Stephen was surrounded by more than a dozen medical professionals, including Dr. Sundram, who were administering life-saving care. "There had to be a minimum of 20 people responding to that event," he explains.

Within minutes, the husband and father of two grown sons was placed on a gurney and whisked to the hospital's emergency room where he was stabilized before being moved to the critical care unit. A defective aortic valve was confirmed.

Four days later, cardiovascular/thoracic surgeon Bryan Lee, M.D., performed an open-heart aortic valve replacement. Two days after that, electrophysiologist Andy Lin, M.D., implanted a pacemaker to regulate Stephen's heart rhythm, and by Dec. 15, the thankful retiree was recovering in the comfort of his own home.

Stephen completed cardiac rehabilitation at Ingalls last April, and last summer resumed one of his treasured activities, international travel with his wife.

In letters to Dr. Sundram and Dr. Lee, he poignantly expressed his profound gratitude.

"A simple 'thank you' seems so inadequate, considering the magnitude of what you restored for me and our family," he wrote to Dr. Sundram. "I'm grateful to God for allowing that episode to occur where it did—at the hands of highly competent people who could be trusted."

Stephen added in his letter: "I feel that my life was saved for more days of adventure, learning, service, shared laughter and hugs, and hopefully a bit of mischief along the way—the things that make life full, rich and worthwhile."





For more information about cancer research at Ingalls, please scan this code with your smartphone.



Now in remission, leukemia patient Barbara LaBarbera is closely monitored by Clinical Research Nurse Lynne Muir and oncologist Mark Kozloff, M.D.

Ingalls Among First in Nation to Offer Investigative Drug for Leukemia

Barbara LaBarbera of Kankakee is among the first patients in the nation to benefit from an investigative drug for chronic lymphocytic leukemia (CLL). Ingalls Cancer Care is among the first in the U.S. to offer the M13-982 Study for patients with CLL, which is the most common form of adult leukemia.

The clinical trial uses the investigative drug ABT-199, a targeted therapy that attacks the cancer cells only, leaving the body's healthy cells alone. Not only does it make the therapy more effective, it dramatically cuts down on the drug's side effects. Patients take the medication daily by mouth, and most continue with therapy for the rest of their lives.

CLL is characterized by the production of atypical lymphocytes – specialized immune cells that exist in two forms: B- and T-cells. Produced in the bone marrow, these cells serve a specific function to help the body fight infection.

“The large majority of CLL cases involve mature B-lymphocytes that tend to live much longer than normal,” explains Mark Kozloff, M.D., hematologist/oncologist and medical director of Ingalls Cancer Care.

“Every cancer starts with a single cell that has some defect that makes it cancerous,” he added. “It becomes a problem when it passes along the same defect to its ‘offspring,’ multiplying into great hordes of cancerous cells.”

“The M13-982 Study targets a specific enzyme on the cancer cells to stop the over-production of white blood cells and allow them to die normally,” adds Lynne Muir, R.N., Ingalls Cancer Research Nurse. “It is showing very promising results. In fact, within days of Mrs. LaBarbera’s first dose, her lymphocyte count dropped by half!”

At present, Barbara, who was diagnosed with CLL in 2004, is in remission and feeling very grateful for it.

“It’s like God answered my prayers,” the 72-year-old retired nurse said. “Within a few days, I started feeling better.”

As for being among the first patients anywhere to receive the investigative treatment that may one day become the standard for CLL patients, she adds: “If I ever do anything, I hope I can help someone else when I do it.”

For more information about clinical trials available through Ingalls Cancer Care, call 708.915.HOPE (4673).

Surgeon Gary Peplinski, M.D., checks in on the always effervescent and now cancer-free Ian Lilly.



Complex Colorectal Surgery Gives Country Club Hills Man His Life Back

Colorectal cancer, the second-leading cause of cancer death in the United States, claims thousands of lives each year. In 2013, Ian Lilly of Country Club Hills was almost one of them.



James Wallace, M.D.

For 66-year-old Ian, the only warning signs were a mild case of anemia discovered at a yearly check-up and slight bleeding from the rectum, which he assumed was related to hemorrhoids.

So last spring, Ian's primary care physician referred him to oncologist James Wallace, M.D., who diagnosed him with Stage II colorectal cancer. Dr. Wallace recommended chemotherapy and radiation therapy before surgery to shrink the tumor's size, which was situated very low in the rectum.

There was also talk of a permanent colostomy, which is commonly used when the rectum or colon needs to be removed because of disease or cancer. The remaining portion of the intestine is used to create a stoma, and waste is collected on the outside of the body with an ostomy appliance.

“These are very complex procedures that aren’t done everywhere,” Dr. Peplinski said. “Mr. Lilly also had the benefit of excellent cancer care before surgery to shrink the tumor. He is a wonderful example of the multidisciplinary approach to cancer available at Ingalls.”

“I was willing to do anything to keep from getting a colostomy,” the retired teacher and financial advisor said. “I worked three jobs all my life so I could retire and play golf; I didn’t want to face that.”

Ian was referred to board-certified general surgeon Gary Peplinski, M.D., who specializes in surgical oncology. “Dr. Peplinski, who is a brilliant surgeon, told me he would do his best to prevent a permanent colostomy,” Ian explains.

Reassured, Ian underwent a highly complex procedure at Ingalls last April called a total mesorectal excision (TME) to remove his cancerous rectum. With Dr. Peplinski’s advanced training in minimally invasive surgery, he was able to perform the procedure laparoscopically, meaning several small incisions versus a large abdominal one. The result? Less blood loss and a quicker recovery.

“These are very complex procedures that aren’t done everywhere,” he said. “Mr. Lilly also had the benefit of excellent cancer care before surgery to shrink the tumor. He is a wonderful example of the multidisciplinary approach to cancer available at Ingalls.”

“The procedures were highly successful, and Mr. Lilly has full continence once again,” Dr. Peplinski added.

“I’m so grateful to Dr. Peplinski, Dr. Wallace and the entire Ingalls cancer team. They were all magnificent. It was a long road, but I’m healed and back to feeling good again. In the words of Winston Churchill, ‘Never give in—never, never, never.’”

For more information about Ingalls Cancer Care, call 708.915.HOPE (4673).

Feeling Sluggish? Depressed? Forgetful?

Thyroid disorders are more common than you might think. More than 12 million Americans have thyroid disease, and the most common disorder is hypothyroidism.



Akbar Rahmani, M.D.

“When thyroid hormone levels are too low, the body’s processes start slowing down,” explains endocrinologist Akbar Rahmani, M.D. “As the body slows, you may notice that you feel colder, you tire more easily, your skin is getting drier, you’re becoming forgetful and depressed, and you’ve started getting constipated.”

Because the symptoms can be so variable, the only way to know for sure is to have a simple blood test for thyroid-stimulating hormone or TSH. “Women, especially those over the age of 60, are five to eight times more likely than men to have thyroid problems,” he added.

Over time, untreated hypothyroidism can cause a number of health problems such as obesity, joint pain, infertility and heart disease.

“The thyroid is a small, butterfly-shaped gland situated at the base of the neck, just below the Adam’s apple,” Dr. Rahmani said. “Hormones produced by the thyroid gland have an enormous impact on your health, affecting all aspects of your metabolism.” These hormones maintain

the rate at which your body uses fats and carbohydrates, help control your body temperature, influence your heart rate and help regulate the production of proteins.

When Stephanie Guyton of Chicago was just five years old, she was diagnosed with an overactive thyroid. She had surgery to remove a portion of the gland, and within two years she was contending with hypothyroidism. Although her case is unusual, the symptoms she’s wrestled with for more than 40 years are the same as for people diagnosed in their 40s, 50s or 60s. “The main thing is the fatigue,” she explains. “Feeling tired all the time makes it hard to manage your weight.”

Thankfully, Stephanie has been under Dr. Rahmani’s care for the past 15 years and has responded well to the daily use of the synthetic thyroid hormone levothyroxine. She has her thyroid levels checked two or more times a year to ensure they’re where they should be for optimum functioning.

“The thyroid is like your engine,” she said. “If you’re not getting enough fuel to the engine, you’re going to sputter and stop. I watch what I eat and I take my medication. I know I have to fight through.”

If you think you might be experiencing any of the symptoms of hypothyroidism, ask your primary care physician for a TSH test.

If you need a referral to a doctor, call Ingalls Care Connection at 708.915.CARE (2273).

Balloon Sinuplasty: Cutting-Edge Sinus Surgery with No Cutting

For as long as Sarah Compton can remember, she's fought a losing battle with her sinuses. Chronic infections, numerous rounds of antibiotics and breathing through one nostril were an unfortunate part of life for the 30-year-old schoolteacher from Tinley Park. "I've always been kind of miserable because of it," she explains.

But even though her clogged sinuses made her feel foggy much of the time, Sarah was crystal clear about one thing: Sinus surgery was absolutely out of the question.

"I had heard horror stories from other people who had sinus surgery," she said. "I hated the thought of having packing in my nose."

Last summer, Sarah's sinus symptoms worsened. Dizziness and ear pain made her feel more uncomfortable than ever. "I just wasn't feeling right," she remembers. "I felt dizzy and unstable. I'm an active person, but I spent most of last summer in the house."

Suffering no more, Sarah Compton is able to enjoy the great outdoors with her dog, Bella.

Sarah's doctor referred her to Sherry Fishkin, M.D., board-certified otolaryngologist (ear, nose and throat specialist) at Ingalls.

A CAT scan revealed a fluid build-up and a cyst in her sinuses. Initially, Dr. Fishkin treated Sarah with antibiotics and steroids to clear up the infection and reduce the painful swelling in her sinuses. They offered some relief, but it was short-lived. Sarah knew she was running out of options.

Then Dr. Fishkin suggested a breakthrough, minimally invasive technique called balloon sinuplasty. The procedure uses a small catheter and balloon to quickly and effectively open and expand blocked sinuses—much like balloon angioplasty does for blocked arteries of the heart.

There is no cutting involved, and more importantly for Sarah, no packing of the nose.

In most cases, sinuplasty can be done without removing tissue or bone. It works by widening or expanding the bones that comprise the sinus openings. Moving the bones aside remodels the sinus cavity, creating larger openings that offer less discomfort, a faster recovery and more permanent relief. In fact, many patients experience dramatic improvement immediately and are able to return to normal activities within a day or two. Sinuplasty is performed as an outpatient procedure.

"Patients usually feel a decrease in pain and pressure right away," Dr. Fishkin added. "In most cases, they are pain-free, breathing well and ready for normal activity within a couple of days."

Sinuplasty means no incision, no mechanical debriding of tissue or bone, little or no bleeding, and a success rate that exceeds 90 percent. "It's pretty amazing technology," she adds.



“Patients usually feel a decrease in pain and pressure right away,” Dr. Fishkin added. “In most cases, they are pain-free, breathing well and ready for normal activity within a couple of days.”

“The most amazing thing is that I’ve been able to breathe through both nostrils,” she said. “That was the most noticeable: how much air I was really getting in for the first time.”

While Sarah spent most of her 2012 summer break indoors, she eagerly resumed swimming, walking her dog and traveling in the summer of 2013. She continues to take allergy medication to combat seasonal symptoms, and never leaves home without her nasal saline spray, which helps to keep her sinuses moist.

“I’m so glad I had this done,” she concluded. “I went into this process completely anti-surgery. Dr. Fishkin was wonderful; she tried all the other options first. But this choice was the best for me.”

For more information about balloon sinuplasty or for a referral to an otolaryngologist, call Ingalls Care Connection at 708.915.CARE (2273), or go online to make an appointment yourself at Ingalls.org/InQuicker.

Breeze Through Spring Allergy Season

Millions of Americans are keeping their tissue boxes close by as the spring allergy season is hitting sufferers hard this year.

One of the most effective ways to stave off the itchy, watery eyes and sneezing of seasonal allergies is to start taking medication prescribed by your doctor before symptoms begin. Another is to avoid potential triggers.



Eyas Othman, M.D.

“If you haven’t yet started your medication, it’s not too late, but you may have to wait a week or two to feel its symptom-relieving effects,” notes Eyas Othman, M.D., a board-certified otolaryngologist at Ingalls.

Seasonal allergic rhinitis, or “hay fever,” affects up to 40 million Americans. Of those, up to 80 percent have difficulty sleeping, which can lead to daytime fatigue and reduced productivity at work or school.

To reduce your exposure to the things that trigger your allergy symptoms:

- Stay indoors on dry, windy days. The best time to go outside is after a good rain, which helps clear pollen from the air.
- Delegate grass cutting, weed pulling and other gardening chores that stir up allergens. If you have no choice, wear a dust mask to perform outdoor chores.
- Remove clothes you’ve worn outside. You may also want to shower to rinse pollen from your skin and hair.
- Never hang laundry outside. Pollen can stick to sheets and towels.
- Keep windows closed at home and in the car to limit exposure to allergens.
- Keep nasal saline (salt water) spray around to rinse out your nasal passages two to three times a day. Avoid nasal saline rinses within an hour of taking a medicated nasal spray, however. Nasal saline is not a medication, but it may enhance your management of allergy symptoms when taking other allergy medications.

As for medications, there are several types that can ease allergy symptoms. These include:

Oral antihistamines. Antihistamines (e.g., Claritin, Zyrtec) can help relieve sneezing, itching, runny nose and watery eyes.

Decongestants. Oral decongestants in either pill form or nasal spray can provide temporary relief from nasal stuffiness. Only use nasal decongestants for short-term relief. Long-term use can actually make symptoms worse.

Nasal spray. Cromolyn sodium nasal spray can ease allergy symptoms and doesn’t have serious side effects, though it’s most effective when you begin using it before your symptoms start.

Combination medications. A number of allergy medications combine an antihistamine with a decongestant. Examples include Drixoral and Claritin-D.



Homewood Man Victorious Over Rare Neurological Disorder

Guillain-Barre syndrome is a condition that's as rare as it sounds, affecting one in 100,000 Americans each year.

"With Guillain-Barre syndrome, the body's immune system begins attacking the nerves that carry signals to the brain," explains Engin Yilmaz, M.D., board-certified neurologist on staff at Ingalls. "The nerves' protective covering (myelin sheath) is damaged, and this damage interferes with the signaling process, causing weakness, numbness or paralysis."

Early signs are pain, tingling, inappropriate sensations and ascending paralysis in the legs. The exact cause of Guillain-Barre syndrome is unknown, and many cases appear to occur without any triggers, and suddenly, without warning.

Isaac West's case was one of them.

Guillain-Barre blindsided the 69-year-old Homewood man last February as he was sitting down to breakfast. "My hands froze, and I dropped my knife and fork on the floor," he explains. "Before I knew it, I was on the floor too."

Alone at the time, Isaac managed to call his wife at work, using the back of his hand to operate his phone. She called an ambulance for him, and

the otherwise healthy retiree was rushed to the Ingalls Emergency Department.

He was having trouble breathing, and the weakness that started in his arms and facial muscles became severe until he had complete paralysis of all extremities, as well as his respiratory and swallowing muscles.

Doctors ordered a spinal tap to definitively diagnose the condition. The test came back positive, and Isaac was admitted to the hospital's intensive care unit, where he was placed on a ventilator for two weeks to ease his breathing.

Treatment for Guillain-Barre involves a technique called plasmapheresis, which is a type of blood cleansing. "Plasmapheresis consists of removing the liquid portion of the blood (plasma) and separating it from the actual blood cells," Dr. Yilmaz said. "The blood cells are then put back into

the body, which manufactures more plasma to make up for what was removed."

Isaac spent three months in the hospital, regaining his strength and slowly learning to walk again through physical and occupational therapy.

Today, Isaac walks with the help of a weighted cane. He can once again feed himself and use the bathroom alone. The determined grandfather of 16 looks forward to resuming an active life, swimming and playing baseball with his grandchildren. "Ingalls was brilliant. I'm alive today because of God and because of them."

For more information, call Ingalls Care Connection at 708.915.CARE (2273).



Engin Yilmaz, M.D.



Isaac West works with Physical Therapist Sandy Collins to regain strength.

Ingalls Maternity Suites: The Comforts of Home for You and Baby

Whether you are thinking about having a baby or are already pregnant, the comprehensive maternity program at Ingalls offers a variety of services for mother, baby and family.

Ingalls' comprehensive maternity services, experienced staff, state-of-the-art equipment and attractive birthing suites will make your birthing experience one that you and your family will cherish. To add to your comfort, our 25 private birthing suites feature all the comforts of home, including televisions with DVD players, sleeper-sofas for baby's dad or a support person to spend the night, hardwood floors, large showers, soft lighting, plush furnishings and a wooden glider to rock baby to sleep. Tours of the birthing suites are offered as part of Ingalls childbirth classes, or moms-to-be can schedule a visit.

Ingalls also provides valet "Stork" parking for pre-registered patients. Patients drive up to the hospital's main entrance and present their VIP passes. Staff members meet them in the lobby and personally escort them to their labor and delivery suites. As an added benefit, Taking Care of Mom and Baby, created by our maternity staff, is our gift to every woman who delivers at Ingalls. The book's contents provide helpful answers about baby's care in those first important days.

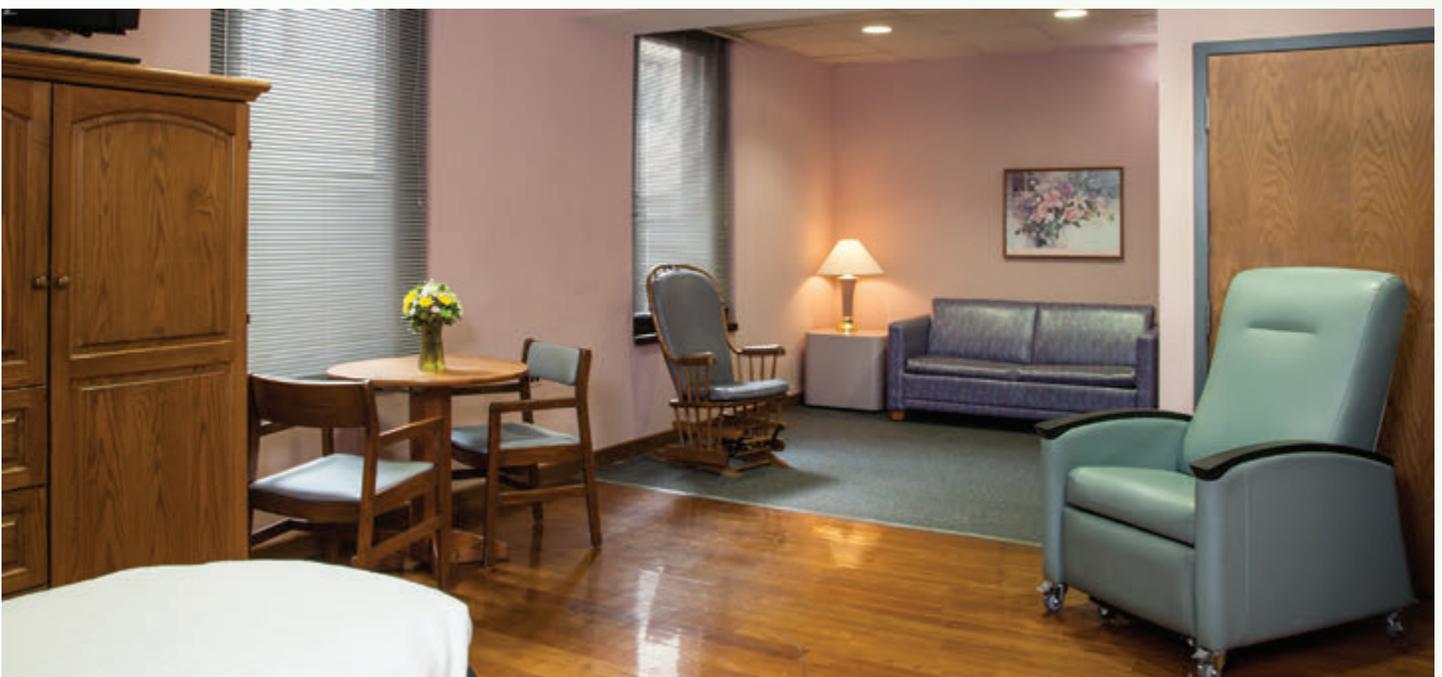
Ingalls is home to a Level II Plus-Nursery with extended neonatal capabilities. This distinction recognizes the advanced monitoring

Large, well-appointed birthing suites at Ingalls provide a comfortable, home-like atmosphere for deliveries and family bonding.

equipment and technology used in our nursery and the special training our staff has completed in everything from ventilator support, to how to care for high-risk newborns. The Ingalls birthing unit also includes two state-of-the-art surgical suites for cesarean deliveries, conveniently located just down the hall from the birthing suites.

At Ingalls, obstetricians and pediatricians work hand-in-hand with many other specialists including anesthesiologists, dietitians, physical and occupational therapists, respiratory specialists, and social workers, as well as certified lactation consultants to assist with breastfeeding, and doulas to assist with labor and delivery.

For more information on Women's Health, Maternity, and Children's programs or to register for classes, call Ingalls Care Connection at 708.915.CARE (2273).



Ingalls Orthopedics Nurse “Walks the Walk” about Anterior Hip Replacement

The energetic Vida Caliendo, R.N., acquired an insider’s perspective on the advanced technique when she underwent her own surgery at Ingalls in 2013.

Now that she’s fully recovered and back to work, Vida, 53, has become a “walking testimonial” for hip-replacement patients at Ingalls.

“When I go in and introduce myself to a hip patient, they’re amazed when they find out I had my own hip replacement several months ago,” she said. “I tell them, ‘You can do this,’ and they believe me because there I am, fully recovered and walking around just fine.”

But she didn’t always move so effortlessly. Vida wrestled with left-hip arthritis for several years, although the pain wasn’t necessarily in her hip. “I would have pain standing, sitting and at rest, but not all the time. Sometimes I felt fine.”

Eventually, the active wife and mother made an appointment to see orthopedic surgeon David Smith, M.D., who recommended non-surgical treatments, but as time went on, her discomfort worsened, and sometimes Vida limped through the day.

In 2013, Dr. Smith recommended anterior hip replacement.

The anterior approach minimizes the pain and time from surgery to recovery, and a wider range of patients may be candidates. The technique involves a single small incision on the front of the hip, allowing orthopedic surgeons to work between the muscles and tissues without detaching them.

“Keeping the muscles intact is the key to greater hip strength and faster recovery,” Dr. Smith explains.

Within a couple days, anterior hip patients can bend their hip freely, bear weight, climb stairs and most importantly, go home, where they can resume normal activities in as little as eight weeks or less.

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Nurse Vida Caliendo has first-hand expertise assisting hip patients recover. She is here with orthopedic surgeon David Smith, the first to bring the anterior hip procedure to Ingalls.

“I really didn’t have any pain at all,” Vida, who spent just two days in the hospital, said. “I took plain Tylenol for the first two weeks after I was discharged from the hospital.

Physically fit, Vida also credits her quick recovery to a regular exercise regimen of walking and Pilates before surgery. She’s especially excited to resume dancing again now that she’s pain-free.

Anterior hip replacement has given me the chance to move around freely again, without pain,” she added.

For more information about the anterior hip replacement at Ingalls, call 708.915.PAIN (7246).

To learn more about anterior hip replacement surgery at Ingalls, please scan this code with your smartphone.



Mini TightRope Procedure Moves Bunion Back in Place Without Cutting Bone

Barbara Loeffler knew she had bunions back in her 20s. “My doctor back then said I would need surgery. But I didn’t listen.”

A bony bump on the joint at the base of the big toe, a bunion forms when the big toe pushes against the next toe, forcing the joint of the big toe to get bigger and stick out. Pain can be intermittent or constant, depending on the severity.

Though the Portage, IN, woman had to wear wider shoes to accommodate her wider foot, it wasn’t her feet that caused her the most pain. It was her back, especially when she stood still for long periods. After her primary doctor ruled out back problems, Barbara made an appointment to see podiatrist Dale Brink, D.P.M., who recommended surgery.

Luckily, Dr. Brink offers a less traumatic option called the Mini TightRope procedure.

“Traditionally, people suffering from painful bunions require a bunionectomy,” Dr. Brink explained. “In a traditional bunionectomy, you would cut the bone and reposition it, or fuse the joint with screws or plates, which can lead to a long recovery of six to eight weeks, during which patients can’t bear any weight on the foot and must use crutches.”

The new procedure, however, uses a special suture material called fiber-wire to pull the bones in the big toe and second toe into proper alignment.

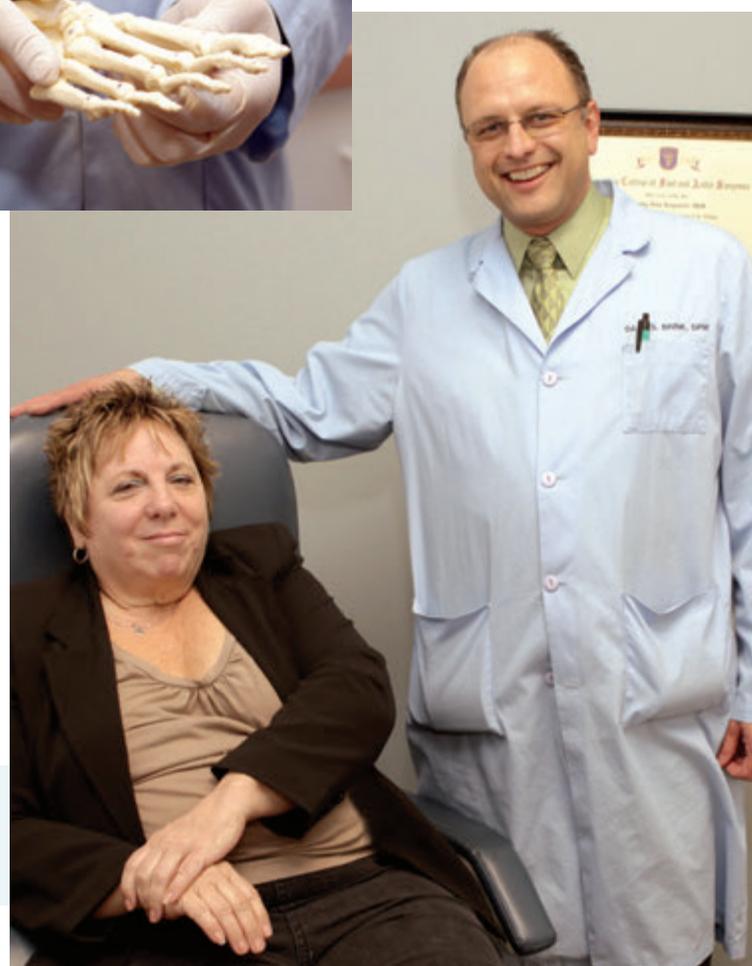
“After surgery, patients wear a postoperative shoe or short walking boot,” he added. “Within two to three weeks, the stitches are removed, and most patients are completely pain-free.”

Barbara had two separate Mini TightRope surgeries at Ingalls: her right foot in January, and her left in February. Not only did her feet feel better, they looked a whole lot better too.

“I can’t believe how straight they are now,” she added. “I’ve only got one body, so I’ve got to take care of it. Dr. Brink is terrific. If you’ve got bunions, I recommend you get them taken care of.”



Barbara Loeffler is finally pain free, thanks to podiatrist Dale Brink and her Mini TightRope procedures.



“The TightRope procedure is not indicated for all bunions, but only those that show a high degree of mobility,” Dr. Brink added.

For more information, call Ingalls Care Connection at 708.915.CARE (2273).

Ingalls Progress is created to provide healthcare information to the residents of Chicago's South Suburbs.

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