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special

6 what a relief See how GMC is helping Atlanta Braves reliever Peter Moylan recover from Tommy John surgery and get back on the mound.
In October 2006, we began Project PATH by opening Gwinnett Medical Center – Duluth. This started a great transformation of healthcare in our community, matching our clinical excellence with modern facilities. GMC – Duluth provided the Joan Glancy Memorial Hospital staff and stakeholders with a beautiful new facility to serve the people of Duluth and the surrounding communities.

Now, the former home of Joan Glancy Memorial Hospital is being revamped. For 20 years, the building has been the home of Glancy Rehabilitation Center, providing award-winning care to patients who have suffered cognitive and physical illnesses. But the former hospital building has plenty of vacant space for new transformations.

The Glancy Campus, as it is now known, welcomes the addition of two new services to accompany Glancy Rehabilitation Center—the Diabetes & Nutrition Education Center (DNEC) and the Center for Sleep Disorders.

In an effort to provide the community with the best in clinical quality and patient satisfaction, the DNEC moved from the Hudgens Professional Building on the campus of GMC – Duluth to the newly renovated Glancy Campus. This professional team of nurses and registered dietitians offers diabetes education, as well as nutrition and weight management education.

We are also excited to be opening a Center for Sleep Disorders at the Glancy Campus to complement our Center for Sleep Disorders in Lawrenceville. The Center treats excessive sleepiness, insomnia, narcolepsy and much more. The accredited program is among a few in the nation that meet the standards of the American Academy of Sleep Medicine.

GMC is proud to continue the legacy that began at Joan Glancy Memorial Hospital through the services now offered at the Glancy Campus. Visit us online at gwinnettmedicalcenter.org for news on future growth at the campus and throughout the medical center.

Philip R. Wolfe, FACHE
President & CEO
February

DIABETES: KNOW YOUR NUTRITION
Date: Feb. 10, 10 a.m.
Location: GMC Resource Center
Understand the impact of nutrition in maintaining or improving your overall health. Participants will receive a booklet to individualize a personal plan for improving nutrition, along with a blood glucose meter. To register, call HealthLine at 678-442-5000.

Fee: $10

CORNERSTONE SOCIETY GALA
Date: Feb. 28
James Carville and Mary Matalin will deliver the keynote address at the event, held at the Terrace Park Medical Center, Lawrenceville. Call 678-312-8500 for more information.

Fee: $0

PRE-DIABETES CLASS
Date: Feb. 17, 6-7:30 p.m.
Location: Glancy Campus
If you are at risk for or if you currently have pre-diabetes, learn what steps to take to delay or prevent the transition to full-blown diabetes. To register, call HealthLine at 678-442-5000.

Fee: $0

CIRCUIT TRAINING
Dates: Mondays, March 30–June 8, 6 p.m. (Glancy) or Thursdays, April 2–June 4, 6 p.m. (Lawrenceville)
Improve your strength and muscle tone with this weekly training class at Glancy Campus, in the Community Education Classroom Center–Peach Room.

Fee: $125

YOGA
Dates: Tuesdays, March 31–June 2, 6 p.m. (Glancy Campus) or Wednesdays, April 1–June 3, 6 p.m. (Lawrenceville)
Learn better breathing, posture and muscular balance through the discipline of yoga.

Fee: $125

PILATES
Dates: Tuesdays, March 31–June 2, 7 p.m. (Lawrenceville); Wednesdays, April 1–June 3 (Glancy); or Saturdays, April 4–June 6, 9 a.m. (Glancy)
Enjoy a more active lifestyle and increase your physical fitness through this innovative strength-training system.

Fee: $125

PRIMETIME T’AI CHI*
Dates: Mondays, March 30–June 8, 2 p.m. (Glancy)
The ancient Chinese art of t’ai chi offers a wonderfully peaceful way to hone your control, power and restorative health.

Fee: $80

In yoga classes specifically designed for PrimeTime members, you can engage your body and heightened your physical and emotional well-being.

Fee: $80

* You must be a member of PrimeTime Health to participate. Take advantage of this free membership by calling HealthLine at 678-442-5000.

CORNERSTONE SOCIETY GALA
Date: Feb. 28
James Carville and Mary Matalin will deliver the keynote address at the event, held at the Terrace Park Medical Center, Lawrenceville. Call 678-312-8500 for more information.

Fee: $0

Ongoing classes

PILATES
Dates: Tuesdays, March 31–June 2, 7 p.m. (Lawrenceville); Wednesdays, April 1–June 3 (Glancy); or Saturdays, April 4–June 6, 9 a.m. (Glancy)
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belly button. Cholecystectomies are one of the most common surgical procedures, and this new innovation makes them far more appealing to potential patients.

Single incision procedures through the belly button and other natural orifices are growing in popularity and are a significant step toward incisionless surgery. “Single-incision laparoscopic procedures are a significant advancement and will soon become the standard for minimally invasive procedures like hernia repair and weight-loss surgery,” says James Elsey, M.D., a vascular surgeon at GMC, president of the Georgia chapter of the American College of Surgeons and one of the first surgeons to perform the procedure in Georgia.

Individuals who are 40 and older, fair, fat, fertile and female—a list referred to as the “five F’s”—most often experience painful gallstones forming in the gallbladder. The American College of Gastroenterology notes that patients with gallstones experience pain in the right upper region of the abdomen and/or pain in the right shoulder or chest.

A new surgical option offered at GMC makes gallbladder removal less invasive, so you can recover faster.

After you’re born, belly buttons don’t seem to serve much of a purpose. But a new surgery offered at Gwinnett Medical Center may change your view of them.

GMC recently expanded its minimally invasive surgical program to include a procedure—single-incision laparoscopic cholecystectomy—that removes gallbladders through an incision in the
Bile in the gallbladder concentrates with increased ingestion of fatty foods. Gallstones form and harden from increased cholesterol and bile salts, and those stones block the bile flow from the gallbladder, resulting in a gallbladder attack. When an attack lasts longer than a couple of hours or is associated with fever, you should see a doctor immediately.

Gallbladder disease is treated by removing the patient’s gallbladder. The single-incision option of the procedure now available at Gwinnett Medical Center results in reduced scarring, fewer incisions, less pain and faster recovery time.

“Three to four abdominal incisions are required for a standard laparoscopic cholecystectomy,” says Dr. Elsey. “This single-incision surgery offers tremendous benefit by reducing scarring and infection. I believe it will soon become the standard for gallbladder removal.”

gallbladder disease: what is it?

Gallbladder disease includes gallbladder inflammation, infection, gallstones and gallbladder obstruction. It’s the most common disease in the U.S., resulting in more than 800,000 hospitalizations annually; 20 million Americans have been diagnosed with gallstones and there are 1 million newly diagnosed cases every year.

Common symptoms of gallbladder disease include painful attacks after a fatty meal; severe pain or aching in the upper abdomen, back or right shoulder blade; a dull ache beneath the ribs or breastbone; nausea; upset stomach or vomiting; jaundice; and dark urine.

Lab tests, ultrasound and a gallbladder scan are tests used for diagnosis of the disease. Treatment includes pain medication if stones are present with no infection or inflammation. However, surgery is the primary method of treatment, including the single-incision surgery highlighted in this article.
After signing with the Minnesota Twins in 1996 and playing in the organization’s minor league system, the relief pitcher was dismissed from the club following the 1997 season. However, this didn’t stop Moylan from continuing to reach for his dream of playing for a Major League level team—it just made him reach harder.

“As soon as you start playing, that’s all you look at—Major League Baseball,” Moylan says. The determined Aussie reinvented himself on the mound, implementing a new side-armed approach that added nearly 10 miles per hour to his fastball. After brilliant performances in both Australia’s Claxton Shield tournament and the inaugural World Baseball Classic, the Atlanta Braves gave him the opportunity for which he had waited nearly a decade—another shot at the big leagues.

In 2007, Moylan finally did reach the Major League level, becoming a staple in Atlanta’s bullpen during the course of a stellar rookie campaign. Entering 2008, he was penciled in as a contender to be the team’s closer before adversity again reared its ugly head.

“We were in Washington, D.C., and I got my first opportunity I ever had to actually close a game,” Moylan says. “I threw a pitch and it sort of felt weird. I didn’t honestly feel anything worse than what I’ve felt before, so I threw about six more pitches after that and I got through it. But it really did feel ornery and I knew there was something wrong. After the game when we high-fived each other, I was high-fiving the guys and I’m going, ‘Oh my God.’”

As fantastic as it felt to earn his first major league save, it felt equally as painful to raise his right arm later that night. “I got in the shower after that and I couldn’t wash my hair—I couldn’t use soap in my right hand,” Moylan says.

Lloyd Van Pamelen, Gwinnett SportsRehab consultant and the Atlanta Braves team physical therapist, explains what happened: “During the pitch, a bone spur was lodged within his ligament that finally initiated symptoms of pain, swelling, loss of motion and, eventually, the inability to throw.”

Moylan tried several rehabilitation options to dislodge the spur, but was ultimately unsuccessful. Because of the spur’s location, he would need to have his ligament cut in order
Braves pitcher Peter Moylan performs rehab exercises with Lloyd Van Pumelet, Gwinnett SportsRehab consultant and the Atlanta Braves team physical therapist.
Van Pamelen and Moylan

Moylan has been enthusiastic yet patient with rehab. This meant Tommy John surgery would be needed, a procedure that replaces the ligament in the elbow with a tendon from elsewhere in the body. Also known as ulnar collateral ligament reconstruction, Tommy John surgery is risky, and has meant the end of many Major League pitching careers.

The surgery effectively ended Moylan's 2008 season, but the 29-year-old is determined to not let it end his career.

"Pete has worked very hard," says Van Pamelen, who has worked with Gwinnett Medical Center for the past 15 of his 20 years as a physical therapist. "Having one year of rehab away from full competition is always a bit of a downer, but Pete, like so many of our rehabbers, has made the best of it. He has been enthusiastic yet very patient with each step of this rehab process."

Moylan is taking a realistic, long-term approach. "You have to think, 'I still have the opportunity to play next year—do whatever you can to try and get back, don't let anything stop you from getting back,'" Moylan says. "You've got to look at it like it's an opportunity to strengthen every other part of your body. I basically had a year off to get stronger for next year, so that's why I'm here now."

"Here" is Gwinnett SportsRehab, an affiliate of Gwinnett Medical Center. It's where Moylan, like several professional athletes before him, including Braves Cy Young Award winner John Smoltz, has been undergoing rehab since May.

"The Braves have been affiliated with these guys for years and years and years," says Moylan, speaking about his comfort level with Gwinnett SportsRehab being in control of his future on the mound. "I've seen Lloyd for three years now, so I know him pretty well. It was a pleasant surprise to meet the other guys—they're all fantastic. They know exactly what they're talking about."

The professionals at Gwinnett SportsRehab know that the medical or surgical treatment of an injury is only the first step on the road to recovery, and that the longer, and often more difficult steps come in the form of rehabilitation. The highly qualified staff of licensed physical therapists, occupational therapists and athletic trainers offers comprehensive assessments and treatment of sports- and work-related injuries.

This level of expertise should soon have Peter Moylan out of the training room and back atop the pitching mound at Turner Field—chasing his big-league dream.

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Gwinnett Braves team up with GMC

Gwinnett Medical Center recently announced it will be the official healthcare provider for the Gwinnett Braves when the team’s inaugural season begins in April.

"The Gwinnett Braves generated tremendous excitement in our community after the announcement that they were coming to Gwinnett," says Jeff Nowlin, executive vice president and chief operating officer for GMC. "GMC is looking forward to being the official healthcare provider for such a solid organization."

As one of only a few founding partners, GMC will work with the Braves on events benefiting the Gwinnett Medical Center Foundation and offer co-branded special promotional items.

For more information on the founding partnership, visit gwinnettmthalcenter.org.
Even with 21st-century medical advances, surgery is still a precise procedure that carries risks to the patient. To help reduce the incidence of complications, Gwinnett Medical Center provides a comprehensive medical assessment for patients undergoing elective surgery. This service, called The Surgical Evaluation Center, is a service of the GMC Inpatient Medical Group and is available at both the Lawrenceville and Duluth campuses.

The program is particularly valuable for high-risk surgery patients. Elective surgery patients are evaluated and may have further testing or changes in medications to better prepare them for surgery. What does that process look like?

Prior to surgery, patients are evaluated by a nurse practitioner who does a comprehensive medical history and physical. Essential diagnostic tests are performed. Patients are generally evaluated within seven to 10 days of surgery and are referred for further medical evaluation if necessary. Evidence-based clinic protocols and guidelines are used to determine what testing is necessary for each patient.

Since its implementation at GMC, the program has served over 1,500 surgery patients.

### types of patients
Any patient who will be having surgery may be referred to the Surgical Evaluation Center program. It is particularly valuable for high-risk patients, including those with:

- Ischemic heart disease
- Poorly controlled hypertension
- Congestive heart failure
- Previous stroke
- Chronic obstructive pulmonary disease
- Diabetes
- Sleep apnea
- Reduced renal function

### 6 benefits of using The Surgical Evaluation Center

- Increases patient convenience—assessments are completed as part of the surgical interview process
- Provides follow-up after surgery by the hospitalist (a specialist caring for hospitalized patients)
- Provides easy coordination and interpretation of all test results, treatment interventions and necessary specialist consultation
- Reduces delays and cancellations of scheduled surgeries
- Provides physicians instant patient history and physical exams
- Easy preoperative planning for surgeons—one phone call is all it takes

The Surgical Evaluation Center is another way GMC is transforming healthcare in Gwinnett.

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GMC’s Surgical Evaluation Center helps decrease the risk of surgical complications.
Jan Bannick used to cycle through her collection of eyeglasses during the course of a day like a model goes through her collection of outfits during the course of a fashion show. The 70-year-old accountant from Lawrenceville had a pair for reading her computer screen, and another for reading a good book. She had a pair for wearing out on the town and another to protect her from the sun. At first, her growing collection was only a burden during some of her hobbies—reading, drawing and painting, to name a few. Then it hindered her ability to read street signs while driving. Later, it would hinder her performance at her office.

“I had gotten to the stage at work where I was using a magnifying glass, which is no good because it really slows you down,” Bannick says.

Bannick was aware of her cataracts in both eyes for several years, but did not see a reason to surgically correct them before these problems ensued. In the early stages, a small cataract may not cause vision problems. But over time, if it grows larger, it will become increasingly difficult to see objects clearly.

“Typically, cataracts grow slowly, and the loss of vision is very gradual,” says Georgia Eye Associates’ Donald Poland, M.D. “Difficulty with night driving is one of the first symptoms of a cataract. As cataracts continue to grow, they may cause difficulty with day driving, reading fine print, seeing the computer or watching television.”

A cataract is a “clouding” of the lens. The lens in the eye, located just behind the iris, works like the lens of a camera. It picks up images, then focuses the lights, colors and shapes on the retina.
the transmitter located at the back of the eye that sends the images to your brain. The cloudier the lens, the more impaired the vision.

“Ms. Bannick was complaining of blurred vision and having difficulty at work,” says Dr. Poland. “She had a comprehensive eye exam and cataracts were discovered. New glasses would not improve her vision—her options were to live with the vision she had, or have cataract surgery to restore her vision.”

Facing the prospect of cataract surgery, Dr. Poland told Bannick about the different choices she had when selecting an intraocular lens (IOL). An IOL is a lens that is implanted in the eye during cataract surgery, to replace the natural lens that has been affected by the cataract. The options are a multifocal IOL, astigmatism correcting IOL or monofocal IOL.

After careful consideration by both doctor and patient, Dr. Poland performed cataract surgery on Bannick at Gwinnett Medical Center, implanting the special multifocal IOL in Bannick’s eye during the surgery, effectively ending her career as an eyeglass model.

“Immediately after surgery, they sat me up on the operating table and I could see,” Bannick says. “It was a miracle.”

Dr. Poland used an AcrySof ReSTOR IOL, which he believes is the most dynamic multifocal lens on the market. The AcrySof ReSTOR IOL is a lens that treats both cataracts and presbyopia—an age-related condition that hampers people’s ability to see or read near objects, forcing the need for reading glasses or bifocals. In clinical trials, four out of five patients who received this lens in both eyes reported never wearing glasses or bifocals following surgery.

“I couldn’t do what I wanted to do—I just wasn’t enjoying life,” says Bannick about the several months leading up to her surgery.

Now, Bannick is free to read, draw, paint, drive and work without the encumbrance of finding the proper glasses for the occasion. “I’m just tickled to death that I had this procedure done,” she adds.
out of the white coat

the thrill of the unknown

for trauma surgeon Romeo Massoud, M.D., every day is a chance for new life-enriching experiences

Romeo Massoud, M.D., has nearly 10 years of experience in trauma care, eight of which he has spent at Gwinnett Medical Center. He was born in Liberia, West Africa, then relocated to Dayton, Ohio, where he earned an undergraduate degree from the University of Dayton and went on to graduate from Wright State University School of Medicine.

Discovering his passion in treating trauma patients after several years in South Central Los Angeles as a general surgical resident, to this day Dr. Massoud says that every case being an "unknown" adds excitement to his profession. He moved to Gwinnett County eight years ago from L.A., choosing the area because he enjoyed the slower Southern pace of life and thought it was a good place to start a family.

Dr. Massoud and his wife, Beverly, and 10-month-old daughter, Safia. His oldest daughter, Vianna, attends college at Kennesaw State University.

Dr. Romeo Massoud and his wife, Beverly

To find out more about how trauma care affects you and your loved ones, please visit GeorgiaItsAboutTime.com
Q&A

1. When I was a child I dreamed of becoming a professional soccer player. I was a four-year scholarship athlete in college and the MVP my senior year.

2. My first job was making potato chips in Dayton at Mikesell’s Potato Chip Co. The job wasn’t easy. It included loading and unloading crates of potatoes, washing and cleaning the cookers with caustic solutions, and packaging. Mikesell’s Potato Chips are still my favorite to this day.

3. Right now on my iPod I’m listening to jazz musicians Peter White and Stanley Jordan.

4. To unwind after a long day I like to spend time with my wife, Beverly, and my daughter Safia. I also like to play the guitar.

5. My favorite thing about Gwinnett is the diversity and different cultures that exist, including the good community of schools and park systems.

6. My favorite restaurants are Garrisons and Bahama Breeze in Duluth.

7. If a movie was made about me I would be played by Hill Harper from CSI New York.

8. My inspiration is my parents, Victor and Martha Massoud. They taught me to be generous, kind and to give back to the community, which also fuels my passion for doing charity work in my native country.

9. When I really get away, I like to lie on the beach, preferably in the Dominican Republic.

10. The next big thing in my medical specialty is working with key stakeholders, politicians and healthcare leaders to develop a statewide trauma network. It’s imperative that every community has a trauma center. Currently, my staff and other trauma-related professionals are working to push a statewide campaign called “Georgia It’s About Time.” It’s about time that those who suffer from medical traumas are transported to a trauma center within their county limits. What most people don’t realize is that just because a hospital has an emergency room does not mean it has a dedicated trauma staff. With this initiative, we are also educating the public on the difference between what is ER and what is trauma. The scary part of the limited number of trauma centers in Georgia is that, if your family is traveling south of Macon and has an emergency anywhere in that area, no trauma care is available, and the patient is four times less likely to survive. When a trauma does happen, Georgia needs to be prepared with accessible care for all residents.
Phil and Mary Jane Wolfe have generously donated $100,000 for an important addition to GMC’s services.

**a healthy start**
In 1963, *Look* magazine named Mount Vernon, Ohio, an all-American city. Phil and Mary Jane Wolfe refer to Mount Vernon as a beautiful, small Midwestern town that, most importantly, holds their childhood memories.

After finishing college on a ROTC scholarship, Phil spent four years in the Army Medical Service Corps. Though Phil and Mary Jane grew up in the same town, they did not meet until they were both pursuing careers in the healthcare industry. They were married on June 7, 1980.

Before spending 10 years in California, Phil and Mary Jane lived in Rome, Ga. in the early ’80s. Phil was the assistant administrator at Redmond Park Regional Hospital. “We loved living in Georgia and wanted to come back to a location in the Southeast,” Mary Jane says. “Gwinnett County is such a great community and we enjoy being a part of it.” Phil became president and CEO of Gwinnett Medical Center in 2006.

**why they give**
Phil and Mary Jane have a genuine concern and desire to see GMC offer the healthcare that the community needs and deserves.

“Mary Jane and I gave this gift to the GMC Foundation because we believe in the cause,” Phil says. “As the CEO of GMC, I also know that we can’t do everything we need to with just earnings. Philanthropy helps us do things so much faster and allows us to better serve the community.”

“When you give back to the hospital, it touches everyone and just continues to grow,” adds Mary Jane.

**inspired by others**
When Phil and Mary Jane first moved back to Georgia, people who gave unselfishly to Gwinnett Medical Center and other organizations inspired them. “As a woman, I was so amazed by Kathryn Willis and Barbara Howard and how much they give this community,” Mary Jane says. “They have taught me that when life treats you well, you should give back. In Gwinnett County, it is so easy to do that because it is such a wonderful place to live.”

Communities support leaders whose actions support a cause and who are ready and willing to do themselves what they ask of others. As President and CEO of Gwinnett Medical Center, Phil Wolfe and his wife, Mary Jane, have shown their leadership through their recent donation of $100,000 to Project PATH’s initiative to bring open-heart surgery to GMC. The Wolfes are passionate about ensuring that all citizens of Gwinnett County receive the best healthcare possible.
The Wolfes have also both been impressed by GMC employees. Phil has said that it was easy to support an organization that has helped themselves. GMC employees have donated over $400,000 to the hospital, and 10 percent of that goes to a benevolence fund that helps other hospital employees in need.

“We feel by donating to the hospital, we are giving a gift to the community,” says Phil. “Everyone is impacted by it and there is a domino effect to better this community.”

Phil and Mary Jane hope they, too, are setting an example for others who are able to give.

* the future of GMC

Phil describes Gwinnett Medical Center as a rocket ship on a launch pad ready to ignite. He believes that the healthcare industry in Gwinnett County is about to take off and GMC is destined for great things. To Phil, the exciting part is that we get to “draw the picture.” This community plays a part in what they want it to be.

“We are also excited about an open heart program,” Mary Jane says. “Our parents have been affected by heart problems, and like Gwinnett County, they lived in an area with no heart facility. This community needs an open heart surgery program.”

The future is bright for Gwinnett Medical Center. What’s next at GMC? “Possibly a new hospital and hopefully in the future GMC can provide other new services that we currently do not,” Phil says. No matter what may happen, Phil and Mary Jane both believe that philanthropy will have a major impact on the future and is a top priority at GMC. vvv

Physician Partners membership grows

Physician Partners was formed in fall 2007 to encourage physicians to serve as donors and advocates for Project PATH, and promote awareness of fundraising initiatives both in the GMC hospital family and the community.

Under the leadership of Manfred Sandler, M.D., the group has grown to over 100 participating physicians. Dr. Sandler and the steering committee have been instrumental in the group’s success. Steering committee members include William McGann, M.D., Martin Austin, M.D., K. Carlton Buchanan Jr., M.D., Gaston Garcia, M.D., Charles Moomey, M.D., and Jon Siegel, M.D.

Dr. Sandler believes the success of the Physician Partners group grew from the realization of physicians to demonstrate their support and strong belief in Gwinnett Medical Center. “In addition to clinical support of GMC, the Physician Partners are also proving their willingness to financially support the GMC Foundation,” says Dr. Sandler. “This support is evidenced by their recent national clinical excellence awards in a whole spectrum of patient care, ranging from surgical care to a number of the more common medical illnesses.”

Dr. McGann has taken the role as chairman for Physician Partners for the upcoming year and anticipates another successful year. His goals are to increase the number of physicians participating in the program and to encourage physicians to promote philanthropy to their patients.

Physician Partners membership grows

“Physicians are the backbone of the hospital,” Dr. McGann says. “Being a part of Physician Partners is great for our medical staff and helps physicians build camaraderie between each other.”

The vision of Physician Partners is to build sustaining relationships with the physician community. The GMC Foundation believes that their support and influence on other community leaders can take the Foundation to a new level in philanthropy.

Here’s what you may not know about Medicare—but should

Medicare may be a complicated program, but at least one thing is very simple — understanding it better can save you money. With that in mind, we’ve provided this quick overview to help you sort through the ins and outs.

There are four parts to Medicare. Part A helps pay for inpatient hospital care, skilled nursing care, hospice care and other services. Part B helps pay for doctors’ fees, outpatient hospital visits, and other medical services and supplies not covered by Part A. Part C allows you to choose to receive all of your healthcare services through a provider organization. You must have both Parts A and B to enroll in Part C. Part D is the Medicare Prescription Drug Program.

Many questions arise regarding Medicare Part B, so here are some helpful tips.

• In 2008, the standard, monthly premium is $96.40 (may be more for higher income individuals).
• To avoid higher premium penalties, enroll during your initial enrollment period, or when you first become eligible, for most at age 65.
• If you do not enroll when you first become eligible to apply, you will have to wait until the general enrollment period of Jan. 1-March 31 (higher premiums will apply).

You may qualify for financial help if you are receiving Medicare and also have:
—Income limited to $15,600/individual or $21,000/married couple living together.
—Have other family members who live with you and support you.

To enroll in Medicare, go to socialsecurity.gov or call Social Security at 1-800-772-1213 (TTY 800-325-0778), or visit the nearest Social Security Office. For more information on Medicare Parts A-D, go to medicare.gov.

How to save a life

Getting screened for colorectal cancer is a simple thing, but could save thousands of lives. When caught early, colorectal cancer has a 90 percent cure rate. The American Cancer Society recommends that, beginning at age 50, men and women should be screened every one, five or 10 years, depending on the screening method you and your doctor choose. If you have bowel disease or a family history of colon cancer, you may need to get screened sooner or more often. To receive a free colorectal screening kit, call the Gwinnett Medical Center HealthLine at 678-442-5000.

A healthy retirement

Learn more at the Social Security Retirement and Medicare benefits presentation, presented by GMC’s PrimeTime Health, on March 10, 2008, noon-1 p.m. at Gwinnett Women’s Pavilion Rose Room on the campus of Gwinnett Medical Center. To register, call HealthLine at 678-442-5000 or visit gwinnetmedicalcenter.org (click Classes & Events).
At Gwinnett Medical Center’s newest imaging facility, you'll find an array of services that were not previously available in north Gwinnett.

- All digital imaging including mammography, bone density, MRI, CT, ultrasound, X-ray and EKG read by board-certified radiologists
- Quick registration & expedited results with an on-site lab

Our newest imaging center offers the clinical excellence you've come to expect from Gwinnett Medical Center and is just one of the ways we are transforming healthcare in Gwinnett.