Harold Schneider had been dealing with lower back pain. His primary care doctor, Ellen Hoefer-Hopf, M.D., sent him for an X-ray to find the source of the problem. When the X-ray failed to provide answers, Dr. Hoefer-Hopf ordered an MRI. Luckily for Harold, his doctor and the imaging equipment are in the same facility—the Outpatient Center at Surfside.

“Everything is right there and close to my house,” Harold says. “I was able to get a preliminary report after I had the MRI and then I stopped back in the next day to pick up a copy to take to another doctor. It really is convenient.”

In addition to imaging—including MRI, CT, X-ray and ultrasound—and primary care offices—both internal medicine and family medicine, the Outpatient Center at Surfside includes a lab draw station and a Breast Health Center. The Breast Health Center offers biopsies, needle placements, mammography, bone density testing and breast MRI.

Deborah Katler had a mammogram at the Outpatient Center at Surfside. “The team members had to tell me that I had a suspect mammogram,” she shares. “Fortunately for me the news was good, but the team handled this worrisome news with such compassion and grace that I will be forever grateful to them. They are a team of wonderful, dedicated women who are remarkable at what they do. It is with great appreciation that I share their names: Kate Fenerty [registration], Teddi Malone [data entry], Christine Ludwig [mammography technologist] and Sherilyn Keller [mammography technologist]. Their level of understanding does not go unnoticed.”

The Outpatient Center at Surfside was created and built as an access point for care in a previously underserved area of Cape Coral. “We are proud to combine multiple services into the facility in order to create a ‘one-stop shop’ for patients who require more than one service,” says Dave Cato, chief administrative officer of Outpatient Services. “Additionally, the Lean design of the space puts care teams in pods, which enables better communication between providers on behalf of our patients.”

Outpatient services will continue to grow as the need for care increases because Lee Memorial Health System is committed to providing the highest quality, compassionate and right care at the right time in the right place.

For information on scheduling:
Lee Physician Group ........................................... 239-481-4111
Breast Health Center ........................................... 239-424-1499
Imaging ............................................................ 239-424-1499
Lab services ......................................................... 239-424-3177
SanCap Cares…About Southwest Florida Kids!

Hat’s off to the SanCap Cares committee for raising more than $800,000 at the 2016 SanCap Cares event to benefit Golisano Children’s Hospital of Southwest Florida.

Little red wagons, used to transport young patients within the hospital and to brighten hospital stays, served as the perfect backdrop for the wonderful evening of giving.

This year’s event drew generous support from scores of residents of the beautiful islands of Sanibel and Captiva, as well as guests from the mainland.

This marks the 16th year for the SanCap Cares event, which began when a group of island mothers, impressed by the care provided to a seriously-ill child from the island community, banded together to raise funds to ensure all children had access to the finest possible hospital care.

Previous SanCap Cares events raised more than $10 million to help build the new Golisano Children’s Hospital. The new hospital, set to open in early 2017, will include a specialized pediatric emergency department named in honor of SanCap Cares and the Sanibel-Captiva community.

Funds raised at this year’s event will purchase cardio-pulmonary monitors for the neonatal intensive care unit and establish the “Little Red Wagon” fund to support a myriad of greatly needed patient care projects and programs throughout the children’s hospital.

Designer Purse Bingo on June 16

Come out to Pinchers Crab Shack at The Marina at Edison Ford (2360 W. First St., Fort Myers) on June 16 for your chance to win designer purses, while helping patients who receive care at our Regional Cancer Center.

Guests will enjoy hors d’oeuvres, dessert and 18 rounds of bingo with the chance to take home purses by Coach, Michael Kors, Dooney & Bourke, Brahmin and more.

All the fun begins at 5:30 p.m. Tickets are just $45 per person and can be purchased online by visiting www.LeeMemorial.org/go/PurseBingo. You may also purchase tickets by calling 239-343-6950 or get more information by emailing Patti.Chlipala@LeeMemorial.org.

Come out, have fun and be the first on your block to shout Bingo!

Minnesota Twins Raise $219,000 for Regional Cancer Center Patients

The Minnesota Twins once again hit a grand slam for patients treated at the Regional Cancer Center by raising more than $219,000 at this year’s Minnesota Twins Celebrity Golf Classic at Fiddlersicks Country Club.

Event proceeds help members of the Southwest Florida community who are battling cancer while also facing economic hardship.

Participants golfed alongside Twins heroes, including Joe Mauer, Paul Molitor, Brian Dozier and more than 30 other Twins players and representatives. Twins General Manager Terry Ryan hosted a question-and-answer session at the Minnesota Twins Mixer the night before the golf event.

“Everyone on our team rallied behind this effort to help patients treated at the Regional Cancer Center and we were pleased so many of our current and former players—along with management personnel and upcoming prospects—were able to hit the links for this great cause.”

Major sponsors included Ultimate Sports Adventures, 21st Century Oncology, FineMark National Bank & Trust, Beattie Development, RD Johnson Construction, Florida Radiology Consultants, the Copham Family Foundation and Mark Weber, Minnesota Twins, James Orr, M.D., Regional Cancer Center; Skip Leonard, Lee Memorial Heath System Foundation and Twins mascot, TC.

To learn more about how you can get involved in next year’s event, please email TwinGold@LeeMemorial.org or call Nicki McTeague at 239-343-6106.

SanCap Cares committee members hitched their red wagon to a star to help children at Golisano Children’s Hospital of Southwest Florida.
Carolyn Silay couldn’t pinpoint exactly what was wrong, but she knew something wasn’t right when her stomach started swelling. Over the course of three weeks, she says her stomach distended to the point that she appeared five months pregnant. She called her obstetrician/gynecologist, Robert Strathman, M.D., and he ordered a CT scan. “The CT scan revealed two dots under my belly button,” Carolyn says. “From there, Dr. Strathman referred me to Dr. [Edward] Grendys [gynecologic oncologist] for follow-up. Days later, I was in Dr. Grendys’ office and he was telling me that I probably had cancer. Four days after that appointment, on April 13, 2015, I had surgery—a total hysterectomy.”

Prior to the operation, Dr. Grendys told Carolyn that if cancer was indeed confirmed it most likely had metastasized within the abdomen. He also said that he was unsure if the disease represented a gynecologic malignancy or another cancer. Because of a much better prognosis associated with a gynecological cancer, he was hoping for the former. Carolyn asked Dr. Grendys to give her a thumbs-up for gynecological cells and a thumbs-down for systemic cells. “I woke up from the two-and-a-half hour surgery to Dr. Grendys, the nurses and my family giving me the thumbs-up,” she says. “It was a relief, but also weird to be celebrating a cancer diagnosis.”

The surgery was a success—Dr. Grendys removed the two tumors from under Carolyn’s belly button and her fallopian tubes. “My family and I were told that I was very lucky to have caught the cancer in the tubes, and that all visible tumors had been removed, “belly button and her fallopian tubes. “My family and I were told that I was very lucky to have caught the cancer in the tubes, and that all visible tumors had been removed,” Carolyn says. Two months after her surgery, Carolyn started 16 rounds of chemotherapy. “Chemotherapy was hard, but I met the most wonderful, compassionate nurses,” she says. “After the second round of chemotherapy, all my cancer markers were normal. I begged Dr. Grendys to let me skip the other treatments, but he was not going to take any chances and he insisted I finish the protocol. I started losing my hair after the third session. By the fourth session, I broke down and cried because I felt like I couldn’t finish the other rounds. My nurses rallied around me—they held me while I cried and encouraged me to continue fighting. You deal with so much when you’re going through chemotherapy, but the people made it easier to handle.”

From June 1 until Sept. 21, Carolyn went through her chemotherapy treatment. “Before I had cancer, my greatest fear in life was getting cancer,” she says. “When I thought about it happening, I decided I would just die and get it over with. But, something changed when I was faced with it in reality. I grew strong and told myself that I am bigger than those cells and I will survive. Prayer every day and meditation were my strength. My family and friends were my power.”

Carolyn also says she tried to visualize the white blood cells in her body as an army—her storm troopers marching in place—ready and waiting to fight off infections. “The cancer made me realize that you don’t sweat the small stuff,” she says. “It gave me insight and I look at life differently now. I appreciate my family and friends more. I have a more positive attitude and I am willing to let go of the small stuff.”

Since her experience, she has had friends who also have had to battle cancer, she says she tells them to visualize their army of white blood cells and to stay positive because surviving and thriving after cancer is possible.

Surviving Cancer is Possible with Right Care, Right Attitude

Carolyn Silay, cancer survivor

Heart Attack Symptoms Differ for Men and Women

The Centers for Disease Control and Prevention lists heart disease as the No. 1 killer for both men and women in the United States. If you have any of the signs or symptoms, dial 911—do not drive to the hospital. The most common symptom for men and women is chest pain or discomfort.

Classic signs of a heart attack include:

- Chest pain
- Pressure (may be associated with nausea)
- Shortness of breath
- Profuse sweating
- Pain radiating to neck, jaw, back or arms

Women may have other, less obvious, signs and symptoms, including:

- Uncomfortable pressure, squeezing, fullness or pain in the chest that lasts more than a few minutes or goes away and returns
- Pain or discomfort in one or both arms, neck, back, stomach or jaw
- Shortness of breath
- Cold sweat
- Nausea
- Feeling lightheaded

Women are more likely to have:

- Pain or discomfort in the upper abdomen, neck, jaw, back, or shoulder
- Pain that is not centered in the chest
- Pain that is less intense than men's pain

At the first signs of chest discomfort, ask for help. It’s the fastest, safest way to help someone who is having a heart attack and increases the chance of a full recovery.

Save the Date—Save a Life

What: Adult CPR, Choking and AED
When: 9-10 a.m. or 10:15-11:15 a.m., June 4
Where: Lee Memorial Hospital
2776 Cleveland Ave, Fort Myers, FL 33901
Cost: Free
Registration: 239-343-6853
Reserve your seat today; seating is limited to 50 people.
Presented by Lee Memorial Health System and Lee County EMS. Participants receive an informational book on CPR from the American Heart Association.
Drug Addicted Newborns a Growing Concern

During pregnancy, nearly every drug a mother takes passes through the placenta to her unborn baby. If the drug causes addiction and dependency for the mother, it will for her baby, too.

Neonatal abstinence syndrome (NAS) is the result of this exposure. It is a condition some babies experience shortly after birth when going through withdrawal from the drugs. NAS is most often caused by exposure to opioids, which are painkillers like codeine, morphine or oxycodone. But can also be caused by exposure to heroin and other street drugs.

Babies diagnosed with NAS often are inconsolable and require specific treatment in the neonatal intensive care unit (NICU). William Liu, M.D., neonatologist and medical director of the NICU at Golisano Children’s Hospital of Southwest Florida, says treatment involves both pharmacologic and non-pharmacologic interventions. The non-pharmacologic treatments include attempting to provide a quiet, subdued environment, swaddling, and providing the withdrawing baby with tender, gentle, calming care by the provider, volunteer cuddler and especially the parents,” he says. “However, when a baby acutely withdraws, he or she requires treatment with an opioid—we use morphine sulfate, primarily; but will also use phenobarbital or clonidine.”

The average length of stay for a baby diagnosed with NAS was about 36 days, but with Golisano Children’s Hospital’s improvements in standardization of the team-based approach to care, the average hospitalization is now about 20 days.

Through the years, Golisano Children’s Hospital has witnessed a sharp increase in the number of NAS cases. In 2002-2003, Golisano Children’s Hospital employed a consistent screening process in order to identify mothers and babies at risk for opioid-related NAS. At that time, there were 3-10 cases per year. Then, there was a significant jump in NAS admissions with a 400% increase from 2005-2009, and a 700% increase into 2010.

“In 2010, there was a pervasive lack of awareness,” Dr. Liu explains. “Mothers often did not understand why their newborn required observation and treatment. Obstetricians and family physicians did not recognize the risk of prescribing opioids to their patients. As medical leaders within our community and a hospital system caring for newborns, we felt the need to sound the alarm.”

A task force was created in 2011 to determine strategies and solutions to prevent and decrease the incidence of NAS, and to address the problem. The task force launched a community awareness campaign targeted at women of child-bearing age and medical providers who cared for women of child-bearing age. All members of the community who might directly or indirectly influence or impact the use or abuse of opioids in women of child-bearing age also were targeted with education.

At the time, in 2011-2012, the incidence of NAS leveled off, but has increased in the years since.

“NAS remains a challenging and growing concern in Southwest Florida and the nation,” Dr. Liu says. “The medical community is acutely aware of this relentless epidemic, and most recently has recommended new standards to control and decrease the routine prescribing of opioids for pain management. Florida also has made real strides in decreasing the proliferation of ‘pill mills,’ but the source of opioid drugs has now been replaced by heroin and street drugs, which are even more uncontrolled and dangerous alternatives.”

It is crucial for the health and well-being of newborn babies that mothers— to be are aware of the impact of drugs on their babies. Talk to your doctor about any drugs or medications you take before you become pregnant or as soon as possible after you find out you are pregnant so you can be sure you and your baby have the healthiest future possible.

Babies exposed to and dependent on drugs experience a range of withdrawal signs and symptoms after birth, including:

- Dehydration
- Diarrhea
- Fever
- High-pitched crying
- Inability to sleep or eat normally
- Irritability

Drug Addicted Newborns a Growing Concern

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Crossed Eyes in Children Require Immediate Attention

When 2-year-old Alexander Walimire complained that the sun was too bright, his parents did not know if the condition was serious. Then, he lost his depth perception and almost overnight his eyes crossed.

Ophthalmologist Alexander Pogrebniak, M.D., initially took a conservative approach and recommended bifocal glasses, along with eye patches for two hours each day. “About 2% of children younger than age 6 have abnormal turning in or crossing of the eyes,” Dr. Pogrebniak says. “The percentage of children with any type of eye muscle disorder is about 5%.”

All newborn babies have trouble keeping their eyes straight. Usually, at around 2 to 4 months of age the brain starts focusing both eyes into one image, an ability that pediatric ophthalmologists call fusion. It is fusion that keeps the eyes working together and in alignment. If the brain does not develop nerve connections from both eyes at the same time, then strabismus—or crossed eyes—will often result.

“There are different opinions as to what causes strabismus, but many children seem to be born with an underlying tendency for the eyes to turn in or out,” Dr. Pogrebniak says.

“Strabismus can be seen in twins or often in members of the same family.”

Other causes of strabismus include excess farsightedness or the strain to focus. This problem usually shows up sometime after infancy, usually between 1 to 5 years of age.

“Strabismus should not be ignored in hopes that it will go away,” Dr. Pogrebniak says.

“An initial eye evaluation is important because strabismus can be the tip of the iceberg—a sign of problems inside the eye. Any problem inside the eye that interferes with vision may cause the eye to wander or drift.

“For example, a cataract (which can occur in children), inflammation in the eye, or an eye tumor may be a cause for strabismus. Only certain types of strabismus patterns make us concerned for problems in the brain. In those cases, imaging of the brain with MRI may be recommended.”

Dr. Pogrebniak treats crossed eyes as soon as possible to avoid permanent damage, including poor vision, called amblyopia, which occurs when the brain ignores the input from the eye and the nerve connections from the eye to the brain do not develop well.

“If the poor vision is not restored usually by 8 to 10 years of age, then the vision will be lost forever,” Dr. Pogrebniak says. “The poor vision can usually be improved by wearing an eye patch over the better eye part-time each day or sometimes by using eye drops daily to blur the vision in the better eye. With treatment, younger children have a better outcome than older children, so discovering the poor vision and starting treatment early is important.”

Another treatment on the horizon is to have children play specialized video games, training the children to use both eyes at the same time.

Alexander Walimire recently celebrated his third birthday, with clear vision. Dr. Pogrebniak operated on both of his eyes in November 2015 and Alexander now has straight eyes. “His right eye is still more farsighted than the left eye,” Dr. Pogrebniak says.

“That puts the right eye at risk for losing vision without continued treatment. Alexander will need to use glasses until he is a teenager. He will need to continue wearing a patch over the left eye an hour per day while at home over the next year, possibly longer depending on his progress.”

Alexander's mother, Meredith, is thrilled with the outcome. "We saw an improvement immediately after surgery," she says. "As soon as he woke up, his eyes were straight. The key is catching it early and we are fortunate Dr. Pogrebniak is so precise in his work.”

Alexander Walimire, 3, is developing normally following surgery for crossed eyes.
Aphasia Limits Communication

Language is central to our culture. It is how we let others know our wants and needs, and helps us understand another's point of view. People who develop aphasia, a problem with language, struggle to make others understand them.

“This usually arises due to an injury located in the language center of the brain,” says neurologist John Sullivan, M.D. “This is typically the frontal or the temporal lobe.”

Stroke is the most common cause of aphasia in adults. Other causes could include:

- Seizure
- Dementia
- Concussion
- Migraine
- Brain tumor

Signs and symptoms of aphasia include trouble speaking (unable to produce words, word-substitution errors or completely nonsense speech) or trouble understanding speech.

“The most common treatments are based on initially doing a thorough neurologic work-up to determine the specific cause,” Dr. Sullivan says. “If the cause is a suspected stroke, then an immediate call for an ambulance and rapid evaluation at the emergency department is necessary in order to determine if a patient requires a time-limited powerful stroke medicine called tPA, which is given by a neurologist, or a specialized procedure performed by neuro-interventionalist to further help treat a stroke.”

Hospitalized stroke patients with aphasia receive treatment from a speech-language pathologist. This specialist can be instrumental in the recovery of language function. Working with a neurologist, speech pathologists often help patients recover at least part of their speech deficit.

“There can be significant recovery of language function, depending on the degree of initial injury and the timeliness of neurologic evaluation,” Dr. Sullivan says. “When the cause is a stroke, then the best outcomes are achieved by a rapid evaluation at a hospital that can provide urgent neurological evaluation of stroke patients. A neurologist can simultaneously evaluate and treat the other conditions, which may also mimic stroke and cause aphasia—for example, with seizures.”

Recovering or maintaining language function is critical to the retention of communication abilities, Dr. Sullivan says. “It is critical to explore the aphasia to properly determine the underlying cause, which will then allow the medical team to institute the appropriate treatment.”

Pain in the Joint May be Gout

Arthritis is often inherited and causes pain and stiffness in the joints. Gout is a form of arthritis that causes sudden burning, pain and swelling in a joint, usually a big toe.

Gout is an inability of the body to eliminate nitrogenous wastes (urea/uric acid—from the breakdown of proteins), causing it to build up in the blood,” says orthopedic surgeon Fletcher Reynolds, M.D. “When this occurs, the uric acid precipitates out of the blood stream into the joints and tissues of the body.”

People who have a family history of gout are likely to develop this condition because their kidneys are genetically unable to eliminate the uric acid. “When uric acid enters the joints, it is in a crystalline form,” Dr. Reynolds says. “Since the body perceives it as a foreign object, the immune system attacks the crystals.”

Immune cells (macrophages) engulf the crystals, causing the cells to burst. Large quantities of digestive enzymes are released when the cells burst, resulting in a tremendous inflammatory and destructive environment in the affected joint.

Gout is treated with:

- Drugs that increase the kidneys’ elimination of uric acid to prevent attacks from occurring (allopurinol)
- Drugs that reduce the inflammation (anti-inflammatories) for acute attacks
- Drainage of the affected joint with needles (aspirations)
- Injection of anti-inflammatory steroids
- Minimizing certain protein–rich foods

“Well-controlled gout has a good prognosis,” Dr. Reynolds says. “Poorly controlled gout results in gouty arthritis, frequent attacks and eventually can lead to joint replacement surgery. Also, large masses of uric acid crystals can form in the soft tissue (gouty tophi).”
Nurses Recall Rich History of Service

Combined, they have more than 100 years of nursing service, taking care of thousands of Lee Memorial Health System patients since the 1950s.

Annie Yarbrough, Minnie Jackson, Donna Neff and Diane Spears devoted most of their adult lives to nursing and caring for people. As Lee Memorial Health System closes in on its 100th birthday on Oct. 3, they discussed the history and what that century of service means for them and the community.

When Annie Yarbrough started in 1951, the hospital had one location on Cleveland Avenue and it didn’t have air conditioning. Annie, a retired licensed practical nurse, recalled a rewarding career that included caring for all populations.

“I love to nurse the sick and I love to nurse the babies,” she says. “And I always try to treat them like they were my mother or my father or my son. And I think that’s the way you should do it.”

Annie worked with legendary Lee Memorial Hospital nurse Theo Ellis, the first operating room nurse hired by the hospital. “Theo was one of the best nurses I’ve ever worked under,” Annie says. “She wouldn’t ask you to do something that she wouldn’t do herself. But she would tell you and she said always listen to the patient.

“When they’re telling you something, listen (to) them. And she’d show us things. She didn’t tell you and she said always listen to the patient.

Annie was working when a hurricane blew through in 1960. “Oh, Hurricane Donna. I spent the night here,” she says. “I was on suction machines and the oxygen and all that. During Donna I was lying across the bed taking care of all the patients, doing the suction machines by hand.”

Minnie Jackson spent her entire career at Lee Memorial Hospital. “To think this hospital has been in existence soon to be 100 years is amazing,” she says. “It’s been the center of this community. And for me it’s been my career. I wouldn’t even know how to go out and apply for a job because I worked here 35 years and that was my entire career.”

Minnie says she never thought of going anywhere else to treat patients, but also recalls some of the more strict parts of the job. “Your shoes had to be white, and if they were not, you could not go on the floor,” she says. “Someone had to go to the store and get that polish.”

Minnie says she never thought of working for any other health system. “Lee Memorial (Health System) is the heart of Fort Myers,” she says.

Diane Spears recalls having to wear caps as a nurse. “It was not practical,” she says. “You’re trying to do something for a patient and you’re trying to keep the cap straight and it’s falling all over and it was in the bed. My cap was in the bed sometimes more than on my head.”

Diane started out as a floor nurse and worked her way to a director position, a career path she still holds. “This is so home,” she says. “And I’m comfortable. This is it. I love it.”

Like Diane, administrator Donna Neff has fond memories of her time caring for patients who needed her help. “My whole career has been here,” she says. “I have never worked anywhere else, so it really gave me my career.”

Donna says her co-workers were like a family to her. “We knew your family and your family knew mine,” she says. “It’s been a wonderful, really great 44 years. It means home, our home—where we grew up.”

Men: Make Your Health a Priority with Routine Care and Screenings

Preventative care and screenings help you stay in tune with your health. Historically, though, women have been better at preventative care than men. But, keeping regular appointments with the primary care doctor is important for everyone.

June is Men’s Health Month and a good reminder to make routine care and screenings a priority.

Gary Goforth, M.D., family medicine physician and founding program director of the Florida State University College of Medicine Family Medicine Residency Program at Lee Memorial Health System, breaks down some of the most important health screenings for men.

Cardiovascular Disease

“Since cardiovascular disease (CVD) is the most common cause of death in this county, I highly recommend screening for CVD every 3–5 years in adults older than 20 years of age,” Dr. Goforth says.

According to Dr. Goforth, this check should include:

- Blood pressure
- Weight – ideal body mass index (BMI) between 20-25
- Lipids – in men older than 25 years old with risk factors and older than 35 years old without risk factors
- Blood glucose or hemoglobin A1C – in adults with hypertension (high blood pressure) or hyperlipidemia (high lipids in the blood) or with a BMI greater than 25
- One-time screening ultrasound – in men 65-74 years of age with any history of smoking or family history of an abdominal aortic aneurysm requiring repair

Cancer

Cancer also is a leading cause of death in the United States, so men should be screened for the following:

- Colon cancer – colonoscopy every 10 years beginning at age 50
- Lung cancer – using low-dose CT scan in patients 55-74 years of age with greater than 30 pack-year smoking history or those who have quit smoking in the past 15 years
- Prostate cancer – using PSA blood test and digital rectal exam in high-risk men 40-45 years of age or those older than 50 years of age without risk factors
- Skin cancer – periodic skin exams

Important Vaccinations

Dr. Goforth says all men should have the following immunizations:

- Annual influenza vaccine
- Tetanus, diphtheria, acellular pertussis (Tdap) – at least once
- Tetanus-diphtheria (Td) – every 10 years
- Varicella (chickenpox) if no evidence of immunity
- Human papilloma virus (HPV) until 21 years of age
- Shingles vaccine – one time older than 50 years of age
- Pneumococcal vaccine – if risk factors and older than 65 years of age (Pneumovax 13 initially, then Pneumovax 6-12 months later)

Along with routine, preventative care, Dr. Goforth has some other basic tips to help men stay on track with their health. “Eat a healthy diet—ideally a plant-based diet, but definitely one that is lower in fat and cholesterol—to avoid obesity,” he says. “It’s also important to exercise regularly—moderate to vigorous intensity 3-5 days per week for 30-60 minutes per day is ideal. Have regular checkups. Exercise moderation with alcohol use. Avoid smoking and illicit drug use; and follow the health maintenance tips above.”

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Acid Reflux and Barrett’s Esophagus Linked to Cancer

Gary Valentine dealt with acid reflux for years. His wife, Patricia, says it seemed like he’d just always had it. For the past couple of years, Gary was living with Barrett’s esophagus, which is a complication of chronic acid reflux.

“With acid reflux, stomach acid backs up into the esophagus,” explains Brian Rajca, M.D., gastroenterologist. “The stomach acid damages the lining of the esophagus, which is not well equipped to protect itself against gastric acid. As the lining heals itself, the cells adapt and change to protect the esophagus. Barrett’s esophagus occurs when the cells lining the esophagus transform into an intestinal type of cell that can produce mucus and better protect the esophagus from acid exposure.”

Barrett’s esophagus can transform to dysplasia and ultimately esophageal cancer.

Dr. Rajca says dysplasia is the earliest form of precancerous cell growth, and can range from low-grade to high-grade. High-grade dysplasia is one step below cancer and needs prompt treatment. Patients with Barrett’s esophagus should be regularly screened with upper endoscopy and biopsy. If precancerous cells are found, they can be treated endoscopically using radiofrequency ablation, which uses heat generated by radio waves to eradicate the abnormal cells growing in the esophagus.

“The cells in Gary’s esophagus were cancerous,” Patricia says. “But, thankfully, Dr. Rajca was able to remove all of the cancer using an endoscope. As of right now, Gary is cancer-free. Before this, he had already been through vocal cord cancer and needed to have part of his vocal cord removed, so it was a relief that the treatment for the esophageal cancer was so much less invasive.”

It is very important that those with Barrett’s esophagus are properly diagnosed in order to ensure the appropriate monitoring and treatment. “We diagnose the condition by performing an upper endoscopy and biopsy to determine what degree of dysplasia has occurred,” Dr. Rajca says. “Early diagnosis and surveillance are key to be able to use the minimally invasive radiofrequency ablation approach to treatment. Once the dysplasia progresses to cancer, we may not be able to remove the cancer endoscopically. Often the progression is rapid and requires more invasive surgery. Thankfully for Gary, we were still able to use the minimally invasive endoscopic approach.”

Barrett’s esophagus occurs in 10-15% of people with acid reflux. But, due to the fact that acid reflux medications are so widely and easily available, patients may be masking the problem. “We are at the point where most people know they should be screened for colon cancer with a colonoscopy, but we haven’t reached that point with screening for Barrett’s esophagus or esophageal cancer,” Dr. Rajca says. “Esophageal cancer is not completely preventable, but, if found early, we can provide endoscopic treatment that is highly effective.”

Aging is inevitable, but depending on how well we take care of ourselves, there might be a difference between our chronological age and our body age. The Lee Memorial Health System Wellness Centers offer Body Age Assessments to measure how old we are biologically based on our health and fitness.

“Chronological age, fitness levels and appearance only tell part of the story; they don’t tell us what is going on under the skin and within the body,” explains Justin Klein, manager, Lee Memorial Health System Wellness Centers. “This is what the Body Age Assessment will do. By looking at a variety of factors, we gain a better understanding of how efficient and effective a person’s body is and compare it to their chronological age.”

Justin says a very healthy, active person can have a body age multiple years younger than their chronological age. Or, there could be someone who is active, but not living the healthiest lifestyle who may show a body age that is higher than their chronological age. The results of the Body Age Assessment can come as a real surprise to people, but the Wellness Centers can help.

“After we receive the results from the assessment, we are able to create an individualized program to help the person lower his or her body age to a more appropriate level,” Justin says. “Also, being part of Lee Memorial Health System, we can work with other departments in the system to help connect people to services that can further improve their body age.”

A follow-up assessment is done in a timeframe based on the plan created and the goals of the person. “The follow-up requires new blood work, so we do not like to test these too frequently,” Justin says. “The average time between the initial assessment and the follow-up is usually between 6 and 12 weeks. But, we have seen changes in as short a period as only a couple of weeks.”

The Body Age Assessment can be a valuable tool for someone who needs some motivation to make lasting lifestyle changes. If you are interested in learning more or scheduling a Body Age Assessment, call the Wellness Center – Cape Coral at 239-424-3220 or the Wellness Center – Fort Myers at 239-343-4980.

Body Age Assessment Reveals Your Body’s True Age

The Body Age Assessment measures:

- Blood lipid profile
- Flexibility and strength assessments
- Aerobic capacity
- Body composition
- Blood pressure
- Resting heart rate
- Height and weight
- Current lifestyle habits, such as sleep patterns and stress levels

Wellness Center – Cape Coral
609 SE 13th Ct.
Cape Coral, FL 33990
239-424-3220

Wellness Center – Fort Myers
3114 Cleveland Ave.
Fort Myers, FL 33901
239-343-4980

Gastroesophageal reflux disease

Brian Rajca, M.D.
Associates in Digestive Health
625 Del Prado Blvd.
Cape Coral, FL 33990
239-772-3636

Health

GRND

Healthy

Barrett

Esophagus

Stomach

Healthy

Esophagus closed

Esophagus open, allowing reflux

Blood reflux

Dysplasia
Palliative Care Focuses on Quality of Life

For years palliative care was most recognized as end-of-life care. Today, many patients receive palliative care as a way to manage chronic, serious illnesses and health conditions.

“Palliative care does not focus on how long someone lives but how well they live,” says Colleen Tallen, M.D., palliative care medical director for Lee Memorial Health System. “The palliative care team optimizes a person’s quality of life by focusing care on a person’s emotional, spiritual and physical well-being.”

Because of palliative care’s focus on caring for the whole person, the team reflects its commitment to this type of care and includes physicians, nurse practitioners, social workers, acupuncturists, massage therapists and spiritual counselors.

Many of the patients cared for by the palliative care team have one or more chronic illnesses, such as cancer, heart disease, lung disease or dementia. Patients with these types of health issues usually interact with more than one health care provider and are confronted with complicated medical decisions. They may also have symptoms, such as pain or nausea, that negatively affect their quality of life.

Palliative care provides assistance with symptom management, and helps with making complex medical decisions and coordinating a patient’s health care by providing good communication with the patient’s whole health care team.

“It is best when palliative care gets involved early so a patient feels supported,” Dr. Tallen says. “It is empowering to really understand how a medical condition and treatment choice will impact a person’s day-to-day life. Having these types of conversations is best before a medical crisis happens.”

Last year, the Lee Memorial Health System Palliative Care team consulted with patients in the hospital 6,188 times and made 1,500 outpatient visits. “We expect those numbers to climb to nearly 8,000 visits this year,” Dr. Tallen says. “This type of care is growing as our population ages. We are part of a growing trend of ensuring each person’s dignity, no matter how serious the illness or the outcome.”

Where’s Larry?

Working with Environmental Services at Gulf Coast Medical Center

Larry Antonucci, M.D., Lee Memorial Health System’s chief operating officer and former practicing obstetrician has spent countless hours in the exam room, the operating room and the boardroom. Now, he is spending time working in various jobs and positions to better understand and appreciate the roles of every employee throughout the health system.

Larry recently spent time working with Jessica Vargas, a housekeeper in Environmental Services at Gulf Coast Medical Center. “I was impressed with Jessica because she was very engaged with every patient,” Larry says. “She explained why she was in the room and what she was going to do, but she also went beyond just cleaning the room, she built personal relationships.”

Jessica Vargas has been a housekeeper at Gulf Coast Medical Center for 8 years. She is one of the best on the team and helps train new housekeepers.

To view more pictures from Larry’s morning with Environmental Services, go to www.tinyurl.com/WheresLarryGCMC

Palliative care does not focus on the end of life, but rather living a quality life.

Colleen Tallen, M.D.
Palliative Care
Lee Physician Group
8960 Colonial Center Drive
Suite 206
Fort Myers, FL 33905
239-343-9560
www.tinyurl.com/DrTallen

You Tube To view a video on palliative care, go to www.tinyurl.com/CareForLife

To view more pictures from Larry’s morning with Environmental Services, go to www.tinyurl.com/WheresLarryGCMC
Health Matters Delivers Valuable Health Information and Inspiration

Through daily, 90-second “Health Matters” segments, Lee Memorial Health System shares valuable health news, tips and trends from medical experts, patient experiences and details on new technology. Health Matters is produced by Lindsey Fry, health reporter, and videographer Peter Iberseder. The duo strives to create segments that are as entertaining as they are informative.

“You learn best when you enjoy what you see,” Lindsey says. “We are using fresh new video with bright new graphics and interactive standups [this is when the reporter is in front of the camera narrating part of the story] to make the segments informative and entertaining. We are also making sure that patients are a big part of our stories because hearing about their experiences and seeing their recovery makes the story more personal and relatable.”

Lindsey says her goal for Health Matters is to educate the community, and make people aware of the signs, symptoms, causes, and short- and long-term impacts of diseases, disorders and conditions. “I really want the segments to inform people of the health matters that they may overlook every day,” she says. “I want our health experts to teach people how to understand their bodies, while showing the multitude of ways Lee Memorial Health System can help.”

When it comes to health care and medicine, there’s a plethora of topics to focus on. Lindsey says she loves learning about the human body, which is one of the main reasons she accepted the position with Lee Memorial Health System. “Some of my favorite segments are on sleep and sleep studies,” she says. “Everyone sleeps, but not everyone is getting the rest they need while they sleep. Learning about sleep disorders, dreams, hypnosis and the effects each has on your body is a topic I could cover every day.”

Lindsey Fry, Reporter
Lindsey Fry, reporter and media producer, came to Lee Memorial Health System from NBC-2 and ABC-7, where she reported the news. Prior to that, Lindsey worked in news positions in North Carolina, North Dakota and her home state of Arkansas.

Peter Iberseder, Videographer
Peter Iberseder, videographer, has been in the business for many years both at local TV stations and as owner of his own videography company. Peter’s award-winning work has earned him an Emmy and three Edward R. Murrow Awards.

You can watch Health Matters segments on:
- The news on NBC-2
- Lee Memorial Health System’s website—www.LeeMemorial.org
- Lee Memorial Health System’s YouTube channel—www.youtube.com/user/LeeMemorialMarketing
- Lee Memorial Health System’s Vimeo channel—www.vimeo.com/channels/198720

Blood Tests for only $20
No appointment necessary.

Be sure to fast 10-12 hours before your visit. Bring this coupon with you to the lab at any of the locations listed below. We’ll provide your lipid panel, which includes cholesterol, triglycerides, HDL, LDL and a glucose test for only $20 (to be paid at time of service). Results will be mailed to you.

For customer service or general questions, call 239-424-3177. Offer expires July 31, 2016.

Bonita Community Health Center - Lab Services
3501 Health Center Blvd., Suite 2100
7 a.m. – 4 p.m., Monday – Friday

Outpatient Center - South Cape Coral
1335B Cape Coral Parkway
(Big John Plaza)
7 a.m. – 4 p.m., Monday – Friday, Parking and entrance are in back on SE 47th Terrace

Outpatient Center at Surfside
2441 Surfside Blvd., Suite 100
7 a.m. – 5 p.m., Monday – Friday
7 a.m. – 3:30 p.m., Saturday

Lee Memorial Hospital - Outpatient Lab
2776 Cleveland Ave.
7 a.m. – 5 p.m., Monday – Friday

Outpatient Center at Riverwalk
12600 Creekside Lane, Suite 4
7 a.m. – 4 p.m., Monday – Friday

Page Field Medical Village
4761 South Cleveland Ave., Suite 1
7 a.m. – 1 p.m., Monday – Friday

Outpatient Center at the Sanctuary
8960 Colonial Center Drive, Suite 102
7 a.m. – 5 p.m., Monday – Friday
7 a.m. – 3:30 p.m., Saturday

Outpatient Center at HealthPark Commons
16281 Bass Road, Suite 202
7 a.m. – 5 p.m., Monday – Friday
8 a.m. – noon, Saturday

Outpatient Center at Plantation
13601 Plantation Road, Suite 1
7 a.m. – 4 p.m., Monday – Friday

Lee Memorial Health System
www.LeeMemorial.org
Q: Soda may be full of sugar, but my children are a healthy weight, so is it really all that bad for them?

A: Soda is full of “empty” calories because it has zero nutrients. Though your children may be a desirable weight now, there are healthier options like milk or pure fruit juices. Healthy habits we instill in our children while they are young will carry into adulthood, lessening their chances for obesity and other chronic diseases.

A recent study also linked soda consumption to aggression, attention problems and social withdrawal in young children. The more soda the kids in the study drank, the more likely they were to destroy others’ belongings, get into fights and physically attack people, compared to children who didn’t drink any soda. It is uncertain which components of these soft drinks may be to blame, or if the combination of high sugar and caffeine results in these behavioral problems. What we do know for certain is that soda is not the healthiest choice and consumption should be limited.

Pierre Loredo, M.D.
Pediatrics
Lee Physician Group
4751 S. Cleveland Ave.
Fort Myers, FL 33907
239-343-9888
www.tinyurl.com/DrLoredo

Make Health Care Decisions Easy by Planning Ahead

Health care decisions can be difficult, especially when they involve questions of life and death. National Healthcare Decisions Day (NHDD) is a 50-state initiative that exists to inspire, educate and empower the public and providers about the importance of advance care planning. It occurs each year in April but applies to decisions made throughout the year.

“The goal of the program is to encourage anyone age 18 or older to express their wishes on what they want for their health care so providers and facilities respect those wishes, no matter what they might be,” says social worker Deborah Whitehair, who works with the Palliative Care Program at HealthPark Medical Center.

Setting aside specific time to talk about health care decisions serves as a reminder to make decisions regarding care well before the situation may arise when someone, usually a spouse or family member has to make decisions that can have a lasting impact. The theme for 2016 is “It Always Seems too Early, Until It’s too Late.”

A key goal of NHDD is to demystify health care decision-making and make the topic of advance care planning inescapable. Among other things, the day helps people understand that advance health care decision-making includes much more than living wills; it is a process that should focus first on conversation and choosing an agent.

“We all need to have the discussion with our families and our physicians prior to the need, when it becomes too overwhelming and scary to even think about, never mind write on a form,” Deborah says. “Folks tend to think that only the elderly or the terminally ill need to complete advance directives. Everyone older than the age of 18, in all 50 states, as long as they are able to understand clearly what they are signing, should have a directive.”

In Florida, the Health Care Surrogate document and a Living Will are required for someone to know that health care providers will follow his or her wishes, even when the patient can longer speak or communicate.

“I know it can be difficult to think about the possibility of a time when we are so ill that critical medical decisions need to be made, but it is far easier when you are not in an emergent situation than when you are,” Deborah says. “If you are not able to communicate your wishes, it is left up to a state-appointed family member or person to do so for you. It leaves that person or your family in a very difficult position, guessing on what could be life-and-death matters and how you would want to be cared for. That can be an overwhelming burden if the discussion and documents are not done.”

Deborah encourages staff at Lee Memorial Health System to mentor patients, families and their friends, so that their wishes about their future are known and family members and health care providers are not left guessing. “We don’t hesitate to choose our partners, our jobs, our cars, the clothes we wear,” she says. “Why would we want to give up our right to choose the person we want to advocate our care the way we want it, never mind write on a form?”

Folks tend to think that only the elderly or the terminally ill need to complete advance directives.

To access free documents, go to www.LeeMemorial.org or www.NHDD.org.

www.LeeMemorial.org
Cape Coral

Fort Myers

Estero

Bonita Springs

Naples

Lee Memorial Health System Hospitals

Convenient Care locations

Additional locations listed on page 12 and 13

Cape Coral Hospital ............................................. 239-424-2000
636 Del Prado Blvd., Cape Coral, FL 33990

Gulf Coast Medical Center .................................. 239-343-1000
13681 Doctor's Way, Fort Myers, FL 33912
(Daniel Island / Metro Parkway)

HealthPark Medical Center ................................. 239-343-5000
Golisano Children's Hospital of Southwest Florida .......................... 239-343-KIDS (5437)
9981 S. Healthpark Dr., Fort Myers, FL 33908
(Summerlin and Bass Road)

Lee Memorial Hospital .................................... 239-343-2000
Rehabilitation Hospital ..................................... 239-343-3100
Blood Center Location
2776 Cleveland Ave., Fort Myers, FL 33901

Convenient Care - Pine Island Road ................. 239-424-1655
1682 NE Pine Island Road, Cape Coral, FL 33909
7 a.m. - 7 p.m., 7 days a week

Convenient Care - Summerlin ......................... 239-343-7454
16210 Summerlin Road, Fort Myers, FL 33908
7 a.m. - 7 p.m., 7 days a week

Convenient Care - Page Field ......................... 239-343-9800
4771 S. Cleveland Ave., Fort Myers, FL 33907
7 a.m. - 7 p.m., 7 days a week

An outpatient department of Lee Memorial Hospital
Events & Screenings

National Cancer Survivors Day®
- Cape Coral Regional Cancer Center is hosting a special event in honor of National Cancer Survivors Day™. This year’s guest speaker is Dr. Debby Sorensen from Community Health Care.
- 11 a.m. to 3 p.m., June 5
- Boulevard Palm Theatre, 1380 Colonial Boulevard, Fort Myers
- Call 239-332-9607 or email Ddas@LeeMemorial.org to RSVP by May 27. Space is limited; RSVP required.

Mobile Autism Screening
- Gulf Coast Children’s Hospital of Southwestern Florida is offering free screenings for children younger than the age of 8.
- 9:30 a.m. to 2 p.m., June 17
- Fort Myers, Cape Coral, and Punta Gorda
- Call 239-255-5373 or email Ddas@LeeMemorial.org to RSVP. Screenings are encouraged.

Ortho/Neuro/Spine
Preoperative Joint Replacement Class
- Everything you need to know to feel comfortable with your joint replacement surgery.
- Tuesdays at Cape Coral Hospital;
  Wednesdays at Lee Memorial Hospital and Gulf Coast Medical Center.
- Call 239-597-3148

Support Groups/Classes
Ostomy Support Group
- For individuals or family members who have had an ostomy (colostomy, ileostomy or gastroschisis), and the spouses or caregivers of individuals with ostomies.
- 12:30-2:30 p.m., second Tuesday of each month
- Myerlee Manor, 1499 South Myerlee Drive, Fort Myers
- Call Howard Weisberg at 239-847-2129

Pulmonary Fibrosis Support Group
- 12-1 p.m., second Wednesday of each month
- Lee Memorial Hospital Medical Office Building, Suite 705
- 9470 HealthPark Boulevard, Fort Myers
- Call Lynne Paguil at 941-875-5732

Yoga
- This class is available to the general public with a pre-registration given to cancer patients and primary caregivers. No experience required.
- 9:30-10 a.m., Saturdays
- Use yoga to relax, improve your flexibility and overall sense of well-being. Each class is taught by a hospital or community yoga instructor from Lee Health.
- 10-11:15 a.m., every Wednesday
- Regional Cancer Center, Fourth Floor Conference Room
- Class size: limited.

Support Groups/Classes
Mended Hearts Support Group
This national support group is for individuals who have survived a heart health-related disease. Meetings feature expert speakers, including this month’s speaker, Kim Gads, military support coordinator from Lee Memorial Health System. Kim works with veterans on many health issues. Mended Hearts also needs more volunteers to visit the chronically ill heart patients at HealthPark Medical Center.
- 6:30 p.m., the second Tuesday of the month
- Wa Ka Hatchee Community Center, 16760 Bass Road, Fort Myers
- Call Joesann at 239-461-0980

Survivors Group
This support group is for adults who are survivors of traumatic injuries, including traumatic brain injuries or spinal cord injuries. The group allows survivors to share their stories, and to wish hope and healing to one another.
- 6:30 p.m., the second Tuesday of the month
- Lee Memorial Hospital Auditorium
- Contact Gloria Ingram at 239-343-2616 or Gloria.Ingraham@LeeMemorial.org

Lee Physician Group Memory Care
- This support group is for caregivers of those with memory impairments. Our Mission: To provide education, support and guidance and care in all aspects of the Alzheimer’s and dementia journey.
- 4:30 p.m., second and last Thursday of each month
- Outpatient Center at Riverwalk, 12600 Creekside Lane, Fort Myers, Fifth floor conference room, Fort Myers
- Call 239-343-9242

Brain Anergy Support Group
This support group is for people who have experienced brain aneurysms. Family members, significant others and caregivers are welcome.
- 6:30 p.m., Third Thursday of each month
- Lee Memorial Hospital Medical Office Building, Suite 705
- 9470 HealthPark Boulevard, Fort Myers
- Call Tiffanylovesbrains@gmail.com

Mended Hearts Support Group
This support group is for individuals who have survived a heart health-related disease. Meetings feature expert speakers, including this month’s speaker, Kathy Brady, manager of Myerlee Manor, Lee Memorial Home health care programming. Kathy will discuss the goals of these programs, which aim to help patients remain in the comfort of their own home and function as independently as possible, while avoiding unnecessary emergency department visits or hospital admissions. Kathy will also encourage patients and families to attend meetings and become volunteers.
- 6:30 p.m., the second Tuesday of the month
- Wa Ka Hatchee Community Center, 16760 Bass Road, Fort Myers
- Call Joesann at 239-461-0980

Chronic Pain Self Management Program
- Developed by Stanford University, the Chronic Pain Self Management Program is a five-week workshop that provides strategies and skills for living with and self-managing pain. This program is designed to help people manage their pain, reduce dependence on medications, and improve quality of life. The program encourages someone caring for a loved one with pain to also attend.
- Time and date varies
- Location varies
- Call 239-343-5122
Heather Auld, M.D.

Dr. Auld earned her undergraduate degree in German at the University of South Dakota, Vermillion, S.D. She earned her medical degree at the University of South Dakota School of Medicine, Vermillion, S.D. She completed an internship at Sacred Heart Hospital, Yankton, S.D.; a residency at Mount Sinai Medical Center of Cleveland, and a fellowship at the University of Arizona Center for Integrative Medicine, Tucson, Ariz.

Dr. Auld is board certified by the American Board of Obstetrics and Gynecology and is board certified by the American Board of Integrative Medicine.

Areas of Expertise:
- Health coaching
- Women’s health
- Weight management
- Mind-body medicine
- Hormone replacement therapy
- Stress management

To make an appointment, call 239-495-4480

Lee Physician Group

www.LeeMemorial.org

Convenient Care: The Right Care for Minor Emergencies and Illnesses

When faced with an uncomfortable, temporary condition, like an ear infection, flu or rash, prompt medical care can mean a faster road to recovery. Convenient Care walk-in medical offices are the places to go for the right care.

With three locations to serve you, Convenient Care offers the medical help you need for common, nonlife-threatening emergencies. Lab and X-ray services also are available. You do not need an appointment and most insurance plans are accepted.

Open 7 a.m.-7 p.m., 7 days a week.

1 Convenient Care – Page Field
4771 S. Cleveland Ave.
(North of Page Field Commons)
Fort Myers, FL 33907
239-343-9800

2 Convenient Care – Pine Island Road
1682 NE Pine Island Road
Cape Coral, FL 33909
239-424-1655

3 Convenient Care – Summerlin
16230 Summerlin Road
Suite 215
Fort Myers, FL 33908
239-343-7454

For more information, visit www.LeeMemorial.org/Convenient-Care
Healthy Life Center
AT COCONUT POINT

Your destination for services and education to support a healthy lifestyle

At the Healthy Life Center you can:
• Attend health and wellness seminars
• Keep track of your health with a wide range of screenings
• Learn more about our services
• Schedule an appointment with our physicians
• Learn nutrition tips and enjoy cooking demonstrations
• Participate in a variety of classes and workshops
• Schedule an outpatient service, such as rehabilitation and testing

Every Wednesday and Saturday
Walking Club
8:30 – 9:30 a.m.

Wednesday, June 8
Free Vision Screening
12:30 – 1 p.m.

Don’t Discount Your Eyes
1–2:15 p.m. (RSVP)
Dr. Brad Sneed, ophthalmologist

Update on Alzheimer’s Disease-Latest data and treatment recommendations
3–4 p.m. (RSVP)
Dr. Frederick Schaefer, psychiatrist

Thursday, June 9
Personal Safety for Seniors
10-11 a.m. (RSVP)
Lee County Sheriff’s Office

Food Labels 101
2-3 p.m. (RSVP)

Why Does My Back Hurt?
5-6 p.m. (RSVP)
Dr. Sebastian Klichewicz, physiatrist

Friday, June 10
Diabetes: Exploring the Various Treatment Options
2-3 p.m. (RSVP)

Tuesday, June 14
Heart Report Card
10:30 a.m.–3:30 p.m. (RSVP)
Call 239-424-1499 for fees and to make an appointment.

Wednesday, June 15
V02 Max Screening and Gate Analysis for Athletes
3-7 p.m. (RSVP)

Thursday, June 16
Medication Safety and Management
1-2 p.m. (RSVP)

Friday, June 17
Step WiseLee Fall Prevention Lecture
10-11 a.m. (RSVP)

Monday, June 20
Aging in Reverse
3-4 p.m. (RSVP)
Dr. Heather Auld, integrative medicine

Tuesday, June 21
Living Strong with a Weak Heart: Basics of Heart Failure
10:30-11:30 a.m. (RSVP)

Wednesday, June 22
Hormone Symphony
10:30-11:30 a.m. (RSVP)
Dr. Salvatore Lacagnina, internal medicine

Thursday, June 23
Self Defense for Women: ages 13 and up
1-3 p.m. (RSVP)
Lee County Sheriff’s Office; $5 fee

Friday, June 24
Trouble breathing? It could be Asthma!
10-11 a.m. (RSVP)

Saturday, June 25
Kidgits Little Chefs
1-3 p.m.
Interactive fun cooking activity and water safety education
Lee Memorial Health System and Golisano Children’s Hospital
A Simon Mall event, located by Tony Saccos

Tuesday, June 28
Blood Thinners: Risks and Benefits
1-2 p.m. (RSVP)

RSVPs ARE REQUIRED. For reservations call 239-495-4475 or email HealthyLifeCenter@LeeMemorial.org.
Light refreshments provided.

Open: 9 a.m.-6 p.m., Monday-Friday
9 a.m.-4 p.m., Saturday
23190 Fashion Drive, Suite 105, Estero, FL 33928

For information, call 239-495-4475 or visit www.LeeMemorial.org/HealthyLifeCenter