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July 2016

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Centuries before Florence Nightingale set the standard for modern nursing, the world's first Muslim nurse introduced quality nursing practices in the Arabian Peninsula and the Middle East.

Rufaida Al-Aslamia was born in Medina, where her physician father taught her to be an expert healer. She cared for the sick, the poor, orphans and people with disabilities, and trained other women to be nurses. She was among the first in Medina to accept Islam and went into battles with the Prophet Mohammed (peace be upon him), caring for injured and dying Muslim soldiers in field hospital tents. She's even credited with developing the first mobile medical units.

Al-Aslamia wouldn't recognize Saudi Arabia today with its great cities, major industries, and a vast medical system that serves more than 30 million people. Her legacy lives on, however, passed from one generation to the next, and each year the University of Bahrain awards the prestigious Rufaida Al-Aslamia Prize in Nursing to a student who excels in delivering superb nursing care.

She would also be amazed by the nursing profession in Saudi Arabia today. Many have followed her career path in the Kingdom, which in 2014 employed 165,324 nurses, the most recent year reported in the Saudi Ministry of Health (MoH) Statistical Yearbook.

Although most were expatriates from around the world, more than a third – 37.2% – were Saudis, mostly females. The percentage of Saudi nurses in the workforce has climbed steadily in recent years, up from 32.3% in 2010, according to the MoH. The total number of nurses in the workforce also grew by 35,532 during that time. So both the number of Saudi nurses and their presence in the workforce are steadily increasing.

That's good news for Saudi Arabia. In 2014, the MoH reported an average of 537,062 patients visited a health facility every day. That is 4.4 visits annually per person in the Kingdom. Most patients are Saudis, and sharing language and culture allows Saudi nurses to communicate and connect with them in ways most expats cannot.

This also supports the Kingdom's Saudization goals, as more Saudi nurses in the workforce earn a professional salary and contribute to the Kingdom's economy while reducing unemployment and the demand for imported labor.

The steady increase in Saudis being interested in nursing as a career can be attributed to several factors.

First, the profession is evolving and maturing. In the past, nursing was misunderstood and viewed by many as a menial and thankless job with no authority, autonomy or opportunity.

This has changed dramatically with advances in nursing education and practice as well as increased public awareness of the importance and role of nurses. Nurses today are better educated and have greater responsibilities, more influence, better opportunities, and career paths with advanced degrees; specialty areas of practice; and leadership, management and executive opportunities.

"In the past, nurses mostly took vital signs and moved patients from one room to another, which wasn't utilizing their skills," said Chief Nursing Officer Zeina Khouri-Stevens, RN, PhD, at Johns Hopkins Aramco Healthcare (JHAH). "Now nurses don't just carry out orders. They are more empowered, with a voice at the table and more responsibilities."

Nursing in Saudi Arabia Past, Present and Future (Cont.)

Second, nursing education is more available to Saudis, both in the Kingdom and beyond. In 1961, the first female nursing education programs opened in Riyadh and Jeddah to train nurse aides. In the mid-1970s, the Kingdom opened its first college-level nursing program.

Today, at least 13 colleges of medicine and health across the Kingdom have nursing programs. In 2014, nearly 6,800 students attended these nursing schools and 812 graduated, according to the MoH. Most were Saudi females; although, Saudi men are entering the field as well.

"I've been in nursing for 14 years and massive changes are happening in Saudi Arabia. Since I went to nursing school, people's perceptions of nursing have changed for the better," said Halima Al-Talaq, a JHAH clinical nurse lead. "Nowadays, I see more graduates from the Kingdom's schools of nursing. The absence of master's degree programs is beginning to change, too."

Public and private employers are sending more Saudi nurses to graduate and doctoral nursing programs outside the Kingdom. They return with new knowledge, skills, confidence and leadership abilities that boost their careers and benefit employers, patients and colleagues.

"JHAH is supporting nurse-led initiatives that offer more responsibility, autonomy and leadership development. For example, nurses have care management roles that did not exist before, where they plan patient discharges, see that patients get home safely, and check in on them afterward," said Khouri-Stevens.

Third, women are fast becoming essential to the Saudi workplace with the encouragement and support of family and society. Until recent years, Saudi women had fewer opportunities for education and employment outside the home. Now more women are earning college degrees and have a wider variety of jobs available to them.

Nursing presents special challenges for Saudi women, such as long shifts, evening and night hours, and weekend assignments. Female nurses may be asked to work with male patients and colleagues, which can be uncomfortable or unacceptable for some women and men.

So what does this mean for the future of nursing in Saudi Arabia? Some interesting trends and opportunities are emerging that could positively influence the profession in the Kingdom.



Effective Hiring and Retention Strategies

Most experts agree that Saudi Arabia faces a shortage of nurses to care for its growing population with a life expectancy now at 74.2 years. A report by the Kaiser Family Foundation on the number of nurses and midwives the 10,000 residents found that Saudi Arabia ranked 59 out of 153 countries, with 48.7 nurses for every 10,000 people. Switzerland was first, with 173.6, while Chile and Niger tied for last with 1.4.

"Nursing is the future for this country. We need 50,000 more nurses in the next 20 years, but where are they going to come from?" said Amal Ahmree, a JHAH nursing recruitment coordinator with 17 years of in-Kingdom nursing experience.

Addressing this shortage can be done with strategic hiring initiatives. For example, JHAH has a new campus recruiting program. "We recently met with nursing students and new grads at a university in Al-Hasa to tell them about JHAH and what we can offer them," Ahmree said. "They see me as a Saudi nurse and think, okay we have hope there; we can go for it."

It is not just about hiring; it's also about retaining nurses after they are hired. This can be a challenge in Saudi Arabia, where women may be discouraged from working evenings and weekends or working outside the home after they marry or become a parent. Childcare also is a major obstacle to female employment due to the lack of daycare centers in the Kingdom.

"We need more acceptance, more flexibility and daycare for the kids. This is the biggest challenge for working mothers, we don't have enough qualified daycare centers," Ahmree said.

Employers could consider adopting family-friendly policies, offering flexible schedules, providing in-house childcare centers, and making other accommodations to attract and retain Saudi female nurses. Recently JHAH gave its nurses the ability to collaborate on work schedules; as long as all the units are covered, they can work together to choose their shifts.

Postgraduate Degree Programs

Saudi nurses typically must leave their homes and families to study abroad if they want to earn a master's or doctoral degree in nursing. Offering more advanced degree programs in the Kingdom could help address nursing shortages while improving the quality of health care.

"The Kingdom needs more postgraduate schools with qualified faculty members so nurses don't have to leave their families and their loved ones, which is very hard. Make it available here, give them opportunities at home, and support them," Khouri-Stevens said.

The first doctoral nursing program in Saudi Arabia was launched in 2015 by JHAH and the prestigious Johns Hopkins School of Nursing (JHSON) in Baltimore. The first cohort of 13 students includes nine Saudis who can earn their doctor's degree while remaining employed and at home with their families.

"This partnership is going to do so many good things for the people of Saudi Arabia as well as for nursing worldwide," said JHSON Dean Patricia Davidson, PhD, MEd, RN. "We are watching this doctoral program and these exceptional 13 individuals with great pride."

Offering more programs like this would enable more Saudi nurses to advance their education and expand their career options. It also would create academic jobs for experienced Saudi nurses who are ready for a new challenge of sharing their experience and knowledge with students. Credentialing, licensing and practice programs also could be developed for nurses with advanced degrees earned in the Kingdom.

"The nursing doctoral program will help meet JHAH's need for nursing leaders to staff our hospitals. But the benefits beyond that are increasing the skills of nurses in the community; providing an enhanced career path; leveraging our expertise to improve clinical medicine, education and research; and eventually building the capacity to provide better health care in the Kingdom," said JHAH Interim Chief Executive Officer John Ulatowski, MD, PhD, MBA.

Promote and Reward Nursing as a Profession

Recognizing the contributions of nurses and rewarding their professional accomplishments, commitment to public service, and dedication to improving health care would draw attention to nursing as a critical, valued profession. Seminars, career fairs, open houses, and summer volunteer programs for high school students would raise awareness of the rewards and benefits of a career in nursing.

Credentialing, licensing and practice programs for nurses with advanced degrees earned in the Kingdom would also benefit, not only nurses, but the quality of health care provided in the Kingdom, as well as the nursing profession itself.

"Nursing is a noble profession – taking care of all kinds of patients, with the goal to improve their condition and see them in good health. This makes you feel the value of nursing," said Maisa Al-Rabaan, a JHAH nurse and doctoral nursing student.

Her father, Ali Mansour Al-Rabaan, supports his daughter's career choice. "We are very proud of our daughter and what she has achieved. Nursing is an important and honorable professional that makes a difference every day in the lives of our communities and helps to ensure people get the level of treatment they deserve."

Nursing is a vital part of Saudi history, society and health. Now is the time for policymakers, educators and employers to plan for the future of nursing in Saudi Arabia by attracting more Saudis to the profession; providing advanced education opportunities in-Kingdom; and supporting, recognizing and rewarding the contributions of nurses to community health and wellness Kingdom-wide.

JHAH 'Udhailiyah Emergency Medical Services Marks a Significant Milestone



The Johns Hopkins Aramco Healthcare (JHAH) 'Udhailiyah Health Center has a new Emergency Medical Services (EMS) facility. The ribbon-cutting ceremony held on June 19 marked the facility opening and patients being served by emergency room physicians, nurses and support laboratory and radiology staff in a facility with the latest equipment and designed with patient comfort and flow at the forefront. In addition, more patients can be served as the bed capacity is now 14, which is double the capacity of the previous facility, and a helipad has been built to transport the most critical cases. The original clinic area will be refurbished and returned to Primary Care to expand their capacity as well.

"The new EMS not only enhances our ability to better respond to emergencies, but it also increases our primary care capabilities," said Faisal A. Hajji, Chief Operating Officer, JHAH, in his opening comments. "The 'Udhailiyah EMS is part of our greater focus on expanding facilities. It was a long overdue project and we thank the team for bringing it to a successful conclusion."

"This is a great opportunity for us to serve our members and patients in the southern areas, said Zeina A Khouri, Ph.D., Chief Nursing Officer.

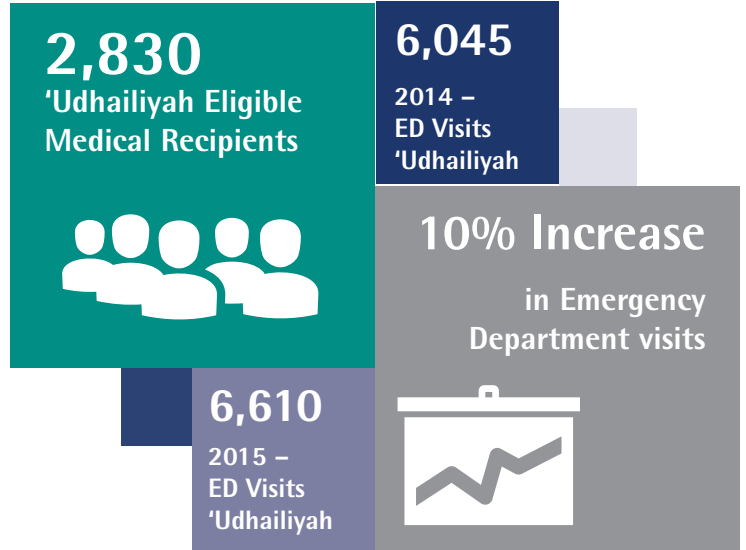
Judith Tilstone, Senior Nursing Supervisor of the al-Hasa and 'Udhailiyah Nursing Units, thanked everyone involved. "I am pleased this day has arrived for the benefit of our patients who will receive the best care possible in a well-equipped setting. I also appreciate the staff who worked in a cramped space for so long. They continued to provide a high standard

of care under difficult circumstances. A true testament to the professionalism and loyalty of the 'Udhailiyah medical staff."

Senior Paramedic Lindsey Baney elaborated on what this day meant for her. "The opening of the 'Udhailiyah EMS brings a new light into our teamwork atmosphere, and medical treatments for our small, yet friendly community. With the expansion, more rooms have become available for education and training and there are suitable-sized trauma and treatment rooms and more comfortable, private and safer facilities for our health care providers and patients. This expansion will mark a lasting memory in my health care career."

After the inauguration, the JHAH delegation met with the Southern Area Management led by Abdullah M. Al-Ghamdi, Executive Director, Gas Operations. In the the meeting, Dr. Daniele Rigamonti, (Interim) CEO and Chief of Staff at JHAH, confirmed the organization's commitment to providing the best medical services in all areas of Saudi Aramco operations.

"JHAH's mission is to provide patient-centered, safe, equitable, efficient, effective and timely care to Saudi Aramco employees and their families," stressed Dr. Rigamonti.



Caring Profile: Lindsey Baney



Lindsey Baney

Senior Paramedic
JHAH Pre-hospital Care Unit in 'Udhailiyah

Educational Background:

- National Registered Licensed Paramedic since 2006
- Bachelor of Applied Science in Health Science from Texas Woman's University, Denton, Texas, U.S.A
- Currently pursuing a Master's degree from Texas Woman's University

Job History:

Critical Care Paramedic with Medical Services, Saudi Aramco, 2009.

Quote:

"I have been a Paramedic in Saudi Arabia for almost seven years, and would describe my experience as a "professional journey. I am blessed to have been given an opportunity to set a precedent as the first female Paramedic for SAMSO and now JHAH."

A paramedic's profession is multifaceted as we have a limited time to manage a scene, provide quality patient care, and educate patients, all while alleviating their anxieties during transport to the emergency room. Every patient is unique and has given me the opportunity to expand my knowledge whether it is from a complex treatment, challenging diagnosis, or a universal smile of gratitude.

Wherever my paramedic and healthcare educator profession takes me I will continue to build on the foundations of «culture care and medicine» that I learned here while on my professional journey.

JHAH Highlights

The new and improved Ward 5C

Johns Hopkins Aramco Healthcare recently completed a total renovation of Ward 5C converting it into an additional Intensive Care Unit (ICU). Not only does it provide an additional eight ICU beds, each room is outfitted with a negative pressure unit, which provides an additional eight isolation beds should they be needed.



JHAH Celebrates 'Id Al-Fitr in the Pediatric Ward

On Monday, July 4, Medical Public Relations Unit organized an 'Id celebration event in the pediatric ward.

JHAH's Dr. Zeina Khouri, RN, Ph.D. Chief Nursing Officer and Hanadi Falih, from Medical Public Relations Unit, were the hosts and coordinated the distribution of gifts, flowers and greeting cards to each of the pediatric patients in wards 6A and 6B.

These 6th floor wards had a total of 21 patients, who along with their families, were the appreciative recipients of this generous gesture provided by the JHAH staff.



Collaborative Learning: Johns Hopkins Medicine International and Johns Hopkins Aramco Healthcare (JHAH)



June 28-30, JHAH hosted Dr. Charles Wiener, Vice President of Academic Affairs and Medical Director, Johns Hopkins Medicine International (JHMI). In his current capacity, Dr. Wiener oversees collaborative educational activities between JHAH and JHM as well as the very successful Distinguished Faculty Visits Program, now in its second year. In addition he oversees the developing research cooperation and research track that is part of the original enhancement plan between JHM and JHAH.

During the visit, Dr. Wiener toured the facility in Dhahran and met with senior leadership and the executive team to assess the needs for educational activities and plan for the coming year.

The visit is part of ongoing collaboration as current ideas and activities are developed into more integrated, concrete action plans. Prior to leaving, Dr. Wiener expressed his confidence in the capabilities of JHAH and his eagerness to work with JHAH staff for the mutual benefit of both institutions and ultimately all of our patients.

Charles M. Wiener, M.D.

Medical Director and Vice President of Academic Affairs

Johns Hopkins Medicine International

In this role, Dr. Wiener provides leadership on global projects, including strategic planning and project development, and faculty and clinical engagement.

Dr. Wiener is also Professor of Medicine and Physiology at the Johns Hopkins School of Medicine, Director of Undergraduate Studies of the Medicine, Science, and Humanities major at the Johns Hopkins Krieger School of Arts and Sciences, and Osler Internal Medicine Training Program director emeritus at the Johns Hopkins School of Medicine.

Dr. Wiener graduated from Duke University and the University of Miami School of Medicine. He completed specialty training and his chief residency in internal medicine at the University of Washington in Seattle.

He has won numerous awards at Johns Hopkins for medical student teaching and housestaff mentorship, is the author of numerous scientific publications including Harrison's Internal Medicine Self-Assessment (editions 16, 17, 18) and is an associate editor of the American Journal of Medicine.

He serves as an educational consultant for Duke Corporate Education and is on the international advisory board of the new Qatar University College of Medicine. He is board certified in internal medicine, pulmonary medicine, and critical care medicine, is a member of AOA, and is current president of the Johns Hopkins chapter of Phi Beta Kappa.

Meet Zeina Khouri-Stevens, RN, Ph.D.

JHAH Chief Nursing Officer

A physician dad, a Middle Eastern childhood, an American postgraduate education, and a nursing career at Johns Hopkins in Baltimore; with that background, it's hard to imagine anyone better suited than Zeina Khouri-Stevens, Ph.D., to be Chief Nursing Officer at Johns Hopkins Aramco Healthcare (JHAH).

Khouri-Stevens learned to speak Arabic, English and French in her home country of Lebanon. As the daughter of a doctor, she felt at ease in clinical settings where she observed doctors and nurses at work. "My dad had a couple of nurses he worked with and was very close to. I remember thinking, wow, look at how much they can do and how much he relies on them," she said.

Friends and family assumed that she would become a physician like her father. But her passion was for nursing. "People said to my dad, why can't she be a doctor, like you? But the more people said that the more I wanted to be a nurse. I've seen what a doctor does and I've seen what a nurse does, and I've always wanted to be a nurse," Khouri-Stevens said.

Khouri-Stevens graduated from the Nursing School at American University of Beirut, then moved to California to earn her Master's degree in Nursing at the University of San Francisco. She then went to the University of Maryland in Baltimore to get a Doctorate in Nursing.

Nursing is a profession where you can do as much or as little as you want, and the more specialized you become, the more opportunities you have, said Khouri-Stevens. "I've always admired operating room nurses, burn nurses, and psychiatric nurses. There are things you know you can and can't do, and specializing gives you the opportunity to match your best fit and your personality," she said.

During her postgraduate studies, Khouri-Stevens became fascinated with neurology, brain trauma and critical care. "Neuro is one of those things, you either love it or hate it. I loved being a neuro nurse and caring for neuro patients. I stayed with it 20 years," she said.

Now that's she's in administration, Khouri-Stevens no longer works directly with patients but she believes that with nursing, you can make a difference in someone's life no matter where you are. "I do miss clinical, hands-on care. In administration, it's a different feeling," said Khouri-Stevens. "Motivating, influencing others can also have an



impact. Making sure the nurses have all that they need and feel comfortable doing what they are supposed to do is a big deal to me."

These days she has plenty of leadership and mentoring opportunities through Saudi Arabia's first doctoral nursing program. JHAH and Johns Hopkins University School of Nursing (JHSON) in Baltimore, Maryland, developed the Doctor of Nursing Practice (DNP) program to prepare clinical nurses to be leaders, executives and role models. Students also learn evidence-based practices that research shows can improve the lives of patients, their families and communities.

Khouri-Stevens works one-on-one with the students as their institutional mentor and is an advisor to some. She says the program is unique because the students can continue their full-time jobs while earning their doctoral degree. "You can see them mature tremendously – academically, professionally, as they learn to research, negotiate, become leaders, and see a different way of doing things," she said.

Khouri-Stevens co-chair of a new advisory council that is sharing ideas to enhance nursing education and professions in the Kingdom. Council members include deans of nursing schools across the Kingdom, the dean of Johns Hopkins University School of Nursing (JHSON) in Baltimore, and

doctoral program administrators from JHAH and JHSON.

Khouri-Stevens, her husband and their two children moved to Saudi Arabia from the U.S. two years ago. Her husband also works for JHAH. They enjoy the expat lifestyle and the opportunity to travel. She also gets to see her family in Lebanon more often than when she lived in the United States.

"It's not for everybody, being in different places and belonging to a community that's nothing like you," she said. "But if you enjoy the life of an expat and make the best of it, it's definitely great. There are a lot of positives, relationships, cultures, and people you would never, ever have met had you stayed home."

Career Highlights

- **2011:** Leadership Development Program, Johns Hopkins Medicine
- **2006:** Doctorate in Nursing, University of Maryland, Baltimore
- **1995:** Master of Science in Nursing, University of San Francisco, California
- **1993:** Bachelor of Science in Nursing, American University of Beirut, Lebanon
- Successful 20+-year nursing career with top management and leadership roles
- Adjunct Faculty, Johns Hopkins School of Nursing
- Author/coauthor of 15 papers published in professional journals
- Recipient of numerous professional honors and awards



Nurses: Making Positive Contributions

The Nurses Week celebration was established in 1954 to recognize the contribution that nurses make to the health and wellbeing of people the world round, including here at Johns Hopkins Aramco Healthcare (JHAH).

JHAH Nurses Week celebrations included events held in each of the districts with Zeina Khouri-Stevens, Chief of Nursing, leading rounds. "In my opinion, JHAH nurses are second to none," said Khouri-Stevens. "I am very proud of my team."

Attending rounds, including the night shift, and visits to all the districts by the leadership team were an important part of the celebration. In addition to appreciating nurses for their hard work, the event reinforced the importance of multidisciplinary teams that benefit from the specialized expertise of each member.

Meet Halima Al Talaq

JHAH Clinical Nurse Lead



Halima Al Talaq, a clinical nurse lead at Johns Hopkins Aramco Healthcare (JHAH), has achieved her dream of becoming a pediatric nurse and more, thanks to her determination and a professional development plan that kept her focused on her long-term career goals.

Before she became a nurse, Al Talaq was an excellent high school student whose grades earned her a spot in medical school, where she could become a doctor like her sister. But she set her sights on being a pediatric nurse. "I love kids," she said. "And I didn't see myself as a physician; I saw myself as a nurse who deals with children. I always had that dream in my mind."

During her third year in nursing school at King Faisal University in Dammam, Al Talaq was accepted into a summer program for nursing students at Saudi Aramco's hospital in Dhahran. In her fifth year she became a nursing intern. "I was really lucky to have those opportunities to learn about basic nursing concepts and different areas of the hospital. That enabled me to see what best matched my capabilities and interests," she said.

After graduation in 2001, she accepted a pediatric nurse position with Saudi Aramco. In 2006, she was promoted to

senior staff nurse. A supervisor encouraged her to set long-term career goals and create a professional development plan to achieve them. The process led her to realize she was ready for something bigger.

"I decided to transfer from the regular pediatric floor to the Pediatric Intensive Care Unit (ICU). It was really tough, but I took the challenge and it benefited me in many aspects of my personality, my skills, and my clinical judgment," Al Talaq said.

"When I moved from the regular floor to the ICU, it took me awhile to reach that stage where I could focus on helping children to get better from their acute illnesses instead of focusing on my emotions and getting distracted by what I was feeling. It's not an easy thing," she said. An online course helped her develop the skills and competencies for ICU nursing and adjust to the faster pace of treating acute clinical conditions. She continued to follow her career plan by learning the role of charge nurse.

In 2010, Saudi Aramco selected her for the master's degree program. She chose to attend the University of Melbourne in Australia because it offered an advanced nursing program with a specialty in pediatric ICU. "It wasn't easy, but I'm really grateful I had that opportunity in my life," said Al Talaq. A year after graduation, she returned to Saudi Aramco as a Pediatric ICU Senior Nurse.

Al Talaq became a clinical nurse lead in the pediatric ICU in 2013. She provides leadership on the floor, acts as a supervisor when needed, and teaches specific competencies to newly hired pediatric nurses. She also teaches leadership and managerial skills to charge nurses and clinical skills to patient care assistants, enabling them to develop professionally and have more responsibilities.

Al Talaq became a student once again in 2015, this time in Saudi Arabia's first doctoral nursing program. JHAH and Johns Hopkins University School of Nursing (JHSON) in Baltimore, Maryland, developed the Doctor of Nursing Practice (DNP) program to prepare clinical nurses to be leaders, executives and role models. Students also learn evidence-based practices that research shows can improve the lives of patients, their families and communities.

"The DNP program is about leadership, management, professional development, and moving the evidence into the



clinical practice," said Halima. Her capstone research project is to improve ICU nurse competencies and confidence in performing continuous renal replacement therapy (CRRT). CRRT is a renal modality similar to conventional renal dialysis, but it's continuous. Renal dialysis patients typically are on a machine for 3 to 4 hours a day several times a week, while CRRT patients can be on a machine nonstop for months.

"You don't handle CRRT that often in pediatric ICU, maybe 3 to 4 times a year, so nurses don't practice it regularly," she said. "I am identifying strategies to help them have more confidence and competence with this procedure, which could benefit the staff and the patients."

Teaching runs in the family – her other sisters are schoolteachers – and Al Talaq enjoys her work as an instructor. She also continues to think about long-term career goals and becoming a leader for future generations of Saudi nurses.



"I'm really grateful I joined Saudi Aramco and now Johns Hopkins, where I've been given many opportunities to develop myself," said Al Talaq. "If there was a proper professional development planning process for Saudi nurses, it would help with workforce retention. I could see myself in academia someday, teaching in a nursing school."

Career Highlights

- **2015:** Doctor of Nursing Practitioner candidate, Johns Hopkins University School of Nursing, Dhahran, Saudi Arabia & Baltimore, Maryland
- **2013:** First place, JHAH "Against the Current Healthcare Award," for developing a pain-free pediatric procedural service
- **2011:** Master of Advanced Nursing Practice, University of Melbourne, Australia
- **2006:** First of several promotions
- **2001:** Hired as a staff nurse by Saudi Aramco, working in pediatrics
- **2001:** Bachelor of Nursing Science with distinction, King Faisal University, Dammam



Safe Use of Herbal Medication



Herbal products are a profitable segment of the dietary and medical supplement industry. As a matter of fact, consumers spent more than \$590 million in the year 2000 on herbal products whose indications varied from weight loss and allergy relief to treatment of depression and diabetes. With consumer's growing interest in alternative medicine, we have reached a point where no matter what disorder a person has, there is a supposedly suitable herbal treatment for it.

Patients and health care practitioners should always remember that herbal remedies are medicines. As with any other medicine, they have the potential to cause adverse effects and therefore should be used with care. Herbal remedies can interact with other medicines. This could result in reducing or enhancing the effects of the other medicine, including adverse side-effects. When consulting your physician or pharmacist, always inform them about any herbal medicines you are taking.

In the growing trend of resorting to alternative and presumably "safer" therapies, patients and health care practitioners should keep in mind that "natural" does not necessarily mean safe. Many plants are poisonous. Herbal products that are unlicensed and/or not controlled by medication regulatory agencies may be produced in unregulated facilities that could be contaminated with toxins or undeclared, dangerous chemical ingredients.

For the most part, the safety of herbal medicines for use by pregnant women, children, breastfeeding mothers, and elderly patients has not been proven.

If you are taking any herbal medication make sure you tell your physician if you are scheduled for surgery as some herbal medicines can alter the effects of anesthetics or blood clotting medications.

If you suffer from any serious health conditions or have a history of liver problems, do not take any type of herbal medication without consulting your physician.

Herbal Medicines and Regulatory Agencies

In 1994, the United States Congress passed the "Dietary Supplement Health and Education Act" (DSHEA). Under this act, herbal product manufacturers are not required to obtain pre-market approval by the Federal Drug Administration (FDA) before making their product available to consumers. Under section four of DSHEA, the burden of proof that a product is impure or contaminated is with the FDA. Herbal manufacturers do not have to prove their products are safe for consumption.

A Saudi Study

A study to assess the quality of herbal remedies available in Saudi Arabia was conducted in 2000-2001 (M. Bogusz, M. Al Tufail, and H. Hassan, *Adverse Drug Reactions and Toxicological Reviews* 2002). In the study, two hundred and forty seven (247) herbal remedies were examined. The results were as follows. Eight (8) preparations out of the 247 contained synthetic drugs (e.g., Ibuprofen and Dipyron in herbal capsules to treat rheumatism). Thirty-nine (39) samples contained high concentrations of heavy metals. This was particularly true of remedies used to treat leukemia (high arsenic content) and skin whitening creams (high mercury content). Eighteen (18) samples were contaminated with micro-organisms, and 14 samples contained toxic substances of natural origin.

In summary, 77 out of the 247 examined preparations (more than 30%) were considered dangerous due to high heavy metal content, bacterial contamination or the presence of toxic organic substances. The study concluded that there is an urgent need to control the production, import and sales of herbal preparations.

Advice for Herbal Medicine Consumers

Remember that the quality, strength and use of herbal products vary widely. Be cautious about safety claims that are not backed by credible evidence. Be careful when products making bold claims such as:

- 100% safe
- Safe because it is natural
- Has no side effects
- Will not interfere with the effects of other medicines
- Beware of any product suggesting that the consumer should stop taking or change the dosage of a prescribed medicine. Consult with your physician before you make any changes to your prescribed medication.
- Be cautious of misleading claims made about any herbal medicine that states it prevents, treats, or cures an illness.

- Beware of false labeling, missing safe usage information or the absence of a complete list of ingredients in the product.
- Similar herbal medicines may have different patient information. Do not assume that the brand with fewest warnings is necessarily safer to use.
- Do not order herbal medicines over the Internet as many unregulated products are sold online and can contain banned pharmaceutical ingredients or may be contaminated with toxic heavy metals.

All medications, including herbal medicines, can cause side effects or unwanted reactions.

If you experience a reaction to an herbal medicine, immediately discontinue using it and inform your physician or pharmacist.

Tips for Storing Medication

- Keep out of reach of children
- Store away from direct heat and light
- Do not store medications in moist or hot areas
- Do not store medication in the refrigerator unless directed to do so
- Do not leave medication in an automobile for a long period of time
- Do not keep outdate/expired medication or medication that is no longer needed



By Layal Al-Khatib

Nutrition Tips for Healthy Skin

Look Healthier ... look Younger ... and Feel Better



Proper and well-balanced nutrition plays an important role in determining the way we look and the condition of our skin, where all of the nutrients that are necessary for healthier and beautiful skin are provided. To achieve this goal of having healthy and glowing skin, the following nutrition tips are recommended:

- Consume well-balanced meals that nourish all of your body, including your skin and prevent skin damage or dryness or dullness. These meals can include the following food groups:
 - Fruits and vegetables with bright colors, such as tomatoes, carrots, cucumbers, oranges, grapes, spinach, peppers, broccoli, banana and kiwi. The recommended daily serving of fruits and vegetables is five.
 - Healthy oils such as olive, canola or sunflower oil, unsalted nuts including walnuts, almonds and seeds are also important for skin health. Oils and nuts should be used in moderation in order to avoid oily skin.
 - Dairy products to provide Calcium and vitamin D, in which low-fat or nonfat products are preferred.

Importance of Antioxidants

Antioxidants fight many diseases and reduce the effect of aging on skin health and keep the body healthy with younger looking skin. Antioxidants promote a healthier and more youthful appearance, particularly of your skin. They neutralize the free radicals that damage the skin and contribute to premature aging of the skin and the appearance of wrinkles. Antioxidants are found in fruits and vegetables, unsalted nuts, green tea, seeds and salmon. Omega 3-fatty acid is an antioxidant that also encourages skin health. It is found in walnuts, almonds, avocado, tuna and salmon.

Importance of Selenium

Selenium is a nutrient that helps in protecting the skin from sun damage and fights the appearance of wrinkles by reducing the effect of free radicals on the skin. It is found in seafood, fruits and vegetables, dairy products (preferred to be low fat or non-fat varieties), whole grains, and skinless poultry.

Importance of Beta carotene

Beta carotene nourishes the skin and keeps it healthy while contributing towards skin repair. It is found in green leafy vegetables and carrots.

Importance of Protein

Protein provides the skin with the nutrients needed for making collagen, which keeps the skin healthy and supports its ability to repair itself. Protein is found in seafood, poultry, meat, dairy products, eggs and dried legumes such as beans and lentils. Lean protein is recommended to be consumed in foods such as low-fat or non-fat dairy products, skinless poultry and fat-free red meat.

Importance of Fluids

Fluids, including low-fat soup, unsweetened fruit juices, vegetable juices, and water, keep the skin well hydrated and avoid dryness, as dehydration can negatively affect all body organs, including the skin. Caffeine containing beverages (coffee, tea, and cola) do not contribute to hydration of the body or the skin. Caffeinated beverages deplete water from the body, if an excessive amount is ingested. Fluids also contribute to distributing antioxidants to the body parts and getting rid of free radicals.

Importance of Vitamins

Vitamins A, B, C, D and E contribute to skin health and skin repair in addition to protecting it from the harmful effects of sun. These vitamins neutralize the free radicals that cause skin damage and the appearance of wrinkles. Consuming well-balanced meals in recommended portions provides the body with all the necessary nutrients that will keep the skin healthy and support skin cell regeneration and repair.

Importance of having Adequate Sleep

Adequate sleep (7 to 8 hours a day) is important for the body to produce new cells and repair damage, including the skin, in addition to the other benefits of sufficient sleep for the brain and the rest of the body.

Other Healthy Tips

- Avoid smoking (active or passive), as smoking causes damage to the skin, accelerates its aging, and reduces the skin's nourishment by limiting blood flow.
- Reducing anemia, as it causes less blood supply and delivery of nutrients to the body's organs, including the skin. Foods rich in iron, folic acid and vitamin B12 are important to avoid anemia. These include seafood,

fortified cereals, lean meat, green leafy vegetables, skinless poultry and eggs.

- Protecting the skin from pollution and excessive exposure to sunlight. It is important to keep the skin protected by limiting the exposure to intense sunlight by using medically approved sunscreen creams.
- Performing regular exercises promotes wellbeing of the body, including the skin, as it improves blood circulation and the delivery of oxygen and nutrients to the skin. This will also help the body in getting rid of toxins that damage the skin and accelerate its aging processes. Physical activity daily or at least 5 times per week for 30 to 45 minutes is recommended, especially combining aerobic and strength exercises.
- Maintaining skin hygiene supports skin health, reduces the risk of skin infection and removes dead skin cells.
- Staying healthy and ensuring that the levels of blood sugar, blood pressure and lipids are within the recommended ranges will keep the skin healthy, as elevations of these levels will affect the skin, reduce blood circulation and the delivery of nutrients to the skin and to all other parts of the body.





In recognition of World Earth Day, the Johns Hopkins Aramco Healthcare nutrition experts have provided you with the following healthy, earth-friendly tips.

- You can do your part and help protect the environment by going green and healthy when working and relaxing.
 - **Reduce:** Select food in quantities that you and your family will consume. This reduces food waste and helps to avoid overeating. Use a mug for drinks instead of paper or Styrofoam cups.
 - **Recycle:** Place your aluminum cans, plastic and glass bottles in recycling bins instead of regular trash bins.
 - **Reuse:** Reuse plastic items. The plastic bags you get at the store can be used to carry your trash out. The plastic containers you get at restaurants for carry out can be washed and reused.
 - **Select** well balanced meals to help you achieve your health objectives. Staying healthy is better for you, your family and the environment.

Practical and Smart Ways to Reduce Food Waste, Save Money and Save the Environment.

- Be smart when shopping as reducing food waste begins at the grocery store. It has been noticed that the majority of wasted foods are fruits, vegetables, and bread. It is

important to always check the food expiration dates and production dates and also their physical condition.

- When you go to shop for food, plan it ahead of time by preparing your shopping list for the items you need to purchase. Do not shop when you are hungry to avoid purchasing more food than you require. It is also recommended to avoid big sales for food including boxes of fruits and vegetables or large containers of bread.
- Cook wisely and avoid placing lots of food on your plate. Using smaller plates and cups rather than larger ones is recommended to avoid overeating and eventual food waste.
- Keep extra uneaten food in the refrigerator, labeled and dated and try to use it within three days.
- Avoid over-stocking of your refrigerator with food to allow the free flow of cold air circulation. Use the food you stored first.
- Avoid all forms of smoking, both active and passive. It is not only bad for your health but bad for the environment.
- Limit your use of plastic bags. Carry reusable bags with you when you shop.
- Do not waste water and energy. Turn off the lights when you leave a room and shut off the electronics that you are not using.



Baba Ganoush

Baba Ganoush is a popular eggplant dip in the Middle East and other Mediterranean countries and is often served as an appetizer. It is rich in fiber, antioxidants, vitamins and minerals.

Ingredients (6 Servings):

- 1200 grams or 4 large whole eggplants
- 6 tablespoons lemon juice
- 3 cloves garlic, peeled and crushed
- 2 tablespoons olive oil
- 3 tablespoons parsley, chopped

Preparation:

- Preheat your oven to 400 °F
- Puncture each side of the eggplant with a fork or slice them in half.
- Roast the eggplant for 45 minutes (turning them 2 to 3 times) or until the skin is blackened and the pulp is soft.
- Allow them to cool slightly and then scoop out the pulp with a spoon. Discard the skin.
- Place the pulp in a mixing bowl and mash it with a fork or blender.

- Add the crushed garlic and lemon juice and mix gently with a spoon until the eggplant becomes smooth and creamy.
- Place into a serving dish.
- Garnish the Baba Ganoush with chopped parsley and serve with lemon slices.
- Serve with olive oil, whole wheat bread, tomatoes, lettuce, cucumber, low fat labnah or low fat or non-fat yogurt or laban for a more balanced and nutritious treat.

Fat and Calorie Contents (per serving):

- **Calorie:** 50
- **Fat:** 5 grams

Health Profile:

Baba Ganoush is appropriate for people with heart disease as it is cholesterol and saturated fat free and is also appropriate for people with diabetes. It is a healthy dish for children, pregnant and lactating women and seniors. Baba Ganoush is rich in nutrients that reduce the risk of heart disease and cancer. It is not recommended for babies below one year of age.

Immunizations

Immunization101: The Basics



Part of staying healthy is preventing illness and disease. Immunizations help us stay healthy and are recommended for infants, children and adults by major health organizations, such as the Centers for Disease Control and prevention (CDC) and the World Health Organization (WHO). The majority of immunizations are given while a child is under the age of four years although booster vaccines are recommended after the age of four, for certain diseases. Vaccines provide protection against infectious diseases such as chicken pox, measles, mumps, rubella, hepatitis A and B, polio, meningitis, whooping cough, tuberculosis and many other respiratory illnesses.

Immunizations work in different ways depending on the type of vaccination. In general, vaccines stimulate the body's immune system, resulting in specific protection to that disease. For example, if a child receives the varicella vaccine (chicken pox) and gains immunity, they will not become sick with the disease even if exposed to chicken pox later in life. Vaccines are typically given as an injection, but certain vaccines can be administered through oral drops or nasal sprays by your health care provider.

Through immunizations, we are able to protect our families from infectious disease and also work towards the eradication of illnesses. For example, polio has nearly been eradicated due to global immunization since the vaccine was developed in the 1950s. Not only do immunizations protect you and your family, but they also help protect our community as well. Pregnant women, ill people, and the elderly have weakened immune systems. If they contract an infectious disease such as chicken pox, the outcome is often very severe and can be potentially lifethreatening. In the past, controversies, resulting from misreported side-effects of immunizations, deterred people from getting vaccinated. For example, many studies now conclusively demonstrate there is no causal association between vaccination and autism. Although immunizations are safe, mild side effects can occur from vaccines such as fever, body aches and pain at sight of the injection; these will resolve soon after the immunization. People with medication or food allergies should inform their health care provider before receiving vaccinations.



The following chart is the recommended vaccination schedule that is used here at Johns Hopkins Aramco Healthcare. Some variations are possible, depending upon a person's medical status or country of origin.

JHAH Child Immunization Schedule	
Birth	BCG (tuberculosis), Hepatitis B
2 Months	Polio, Diphtheria, Tetanus, Pertussis, Hepatitis B, Hib, Pneumococcal (pneumonia, ear infections), Rotavirus
4 Months	Polio, Diphtheria, Tetanus, Pertussis, Hepatitis B, Hib, Pneumococcal (pneumonia, ear infections) , Rotavirus
6 Months	Polio, Diphtheria, Tetanus, Pertussis, Hepatitis B, Hib, Pneumococcal (pneumonia, ear infections)
9 Months	Measles, Meningococcal (meningitis)
12 Months	Polio, Measles, Mumps, Rubella, Pneumococcal (pneumonia, ear infections) Meningococcal (meningitis)
18 Months	Polio, Diphtheria, Tetanus, Pertussis, Measles Hib, Mumps, Rubella, Varicella (chicken pox) Hepatitis A
24 Months	Hepatitis A
4 – 6 Years	Polio, Diphtheria, Tetanus, Pertussis, Measles, Mumps, Rubella, Varicella (chicken pox)
11 – 12 Years	Tdap, Meningococcal (meningitis)
16 – 18 Years	Meningococcal (meningitis)

Annual influenza vaccination for all persons aged six months or older.

Ask the Expert

Skin Health: Answers From Dermatologist Dr. Benjamin N. Lockshin

No one wants wrinkles, sunburn or increased risk of developing skin cancer. But with thousands of types of sunscreen and nearly as many myths about how to stay safe, questions abound. Sunscreen expert and dermatologist Dr. Benjamin N. Lockshin, M.D., FAAD, discusses what you need to know about sun safety.



Benjamin N. Lockshin, M.D. FAAD

Assistant Professor at Johns Hopkins Medicine International

Do I need to use sunscreen on a cloudy day?

Yes, a cloudy day does not give you a pass on using sunscreen. I recommend using sunscreen even on cloudy days because ultraviolet rays can penetrate cloud coverage. In fact, many bad sunburns occur on cloudy days because people tend to be less vigilant about applying sunscreen.

If my sunscreen says "waterproof" do I really need to reapply it after swimming?

All sunscreens need to be reapplied over the course of the day. If you are sweating profusely or if you are in the water for a prolonged period of time, reapply your sunscreen. That being said, sunscreens that are water-resistant will state they are water-resistant for 40 or 80 minutes. After being in the water for 40 to 80 minutes, you should reapply the sunscreen to ensure you are getting proper protection.

If I have dark skin, do I still need sunscreen?

Yes, you still need sunscreen. People of all skin types are susceptible to the negative effects of the sun's energy. Sunburns can occur in persons of all skin colors, and skin damage may ultimately lead to skin cancer. Consult your physician, who can determine what to do next.

Does sunscreen expire? Is expired sunscreen OK to use?

Yes, sunscreens do expire. There are a number of chemicals in most sunscreens, along with physical blockers like zinc oxide and titanium dioxide. For sunscreens that include an expiration date, there is no data or assurance that the products will continue to maintain the advertised efficacy. When in doubt, discard sunscreen that's expired, has been exposed to high temperatures or has changed in color or consistency.

Are there any harmful chemicals in sunscreen?

There are two general types of sunscreens: physical sunscreens and chemical ones. Physical sunscreens use physical UV filters, while chemical sunscreens use chemical UV filters. There are also hybrid sunscreens that contain both physical and chemical sunscreen actives. Physical sunscreens protect your skin from the sun by deflecting or blocking the sun's rays. Chemical sunscreens work by absorbing the sun's rays. Some chemical filters can scatter sun rays, but still mostly just absorb them. The benefit of using sunscreens far outweighs the unproven concerns of applying chemical-based sunscreens. Sunscreens are tested and approved as safe for use by the Food and Drug Administration (FDA). There is no substantiated evidence that the chemicals used in sunscreens are dangerous.

Does a sunburn heal on its own? How do I treat a sunburn?

Unfortunately, once a sunburn occurs there is not much you can do to shorten its course. Studies have failed to show any significant benefit by patients taking aspirin, non-steroidal anti-inflammatory drugs or applying topical steroids. The only treatment is to relieve the discomfort. I recommend using aloe, which is soothing and can provide symptomatic relief. The skin will heal spontaneously over the course of 1-2 weeks. It is possible for the skin to heal with some change in pigmentation. In fact, it is possible for the skin to remain darker or stay pink for a number of months.

Will I be vitamin D deficient if I do not sunbathe?

There are two important things to remember regarding maintaining proper levels of vitamin D. First, almost everyone can maintain adequate vitamin D levels through either their diet or by taking vitamin D supplements. Second, even though sunscreen use can result in decreased vitamin D synthesis, sunscreen use has not been shown to significantly decrease vitamin D levels. Bottom line: You do not need to sunbathe to get adequate vitamin D.

Is it safe for my family to use spray sunscreens, including my baby?

Spray sunscreens are a safe and effective way to apply sunscreens. This is especially true for hairy areas like a balding scalp, hairy back or chest. When applying spray sunscreens, avoid accidental inhalation of the spray sunscreen. When using a spray sunscreen, you should rub in the spray to ensure it is evenly applied. I have seen many patients with streaky sunburns after using spray sunscreens and failing to evenly spread the sunscreen. Sprays are safe for children to use. However, it is important to remember that sunscreens are not recommended for children younger than 6 months. Children younger than 6 months should not be in the sun for prolonged periods of time.

Is there a safe way to tan so I won't get sunburn? Is suntanning bad for my health?

There is no such thing as a good tan. Tans and burns are the body's response to excessive sun exposure. I recommend that patients continue to do outdoor activities they enjoy, but wear sunscreen and avoid times when the sun is the strongest. If possible, avoid prolonged sun exposure from 10 a.m. to 2 p.m. Always remember to wear sunscreen whenever you are out in the sun. The American Academy of Dermatology recommends wearing a broad spectrum sunscreen greater than SPF 30. Personally, I recommend that patients use sunscreen with SFP 50 or greater.

If I use an SPF value of 15 or greater sunscreen, will I get sunburn?

With any sunscreen, it is still possible to get a sunburn. The sun protectant factor (or SPF) refers to the amount of ultraviolet B (UVB) rays that the sunscreen blocks. It does not refer to the duration you can stay in the sun without

burning. In other words, sunscreen ingredients help protect our skin from different wavelengths of light. For example, ultraviolet A and ultraviolet B light are a large spectrum of light. Sunscreen ingredients can only protect to a certain range of that light. The SPF number indicated on a sunscreen bottle does not take into account how well the product protects against ultraviolet A (UVA). There's no number guide for UVA, so when selecting a sunscreen, make sure to look on the bottle for the words "broad spectrum." This means there is good UVA coverage as well as the UVB coverage. Also, look for the ingredients avobenzone 3% mexoryl or physical blockers like titanium dioxide and zinc oxide, which provide good UVA coverage. Even a good, broad-spectrum sunscreen will lose efficacy over a few hours—and the duration is affected by factors such as sweating and water. To be safe, reapply sunscreen every 2 to 4 hours, and try using sunscreen SFP 50 or greater. This is particularly important for those who are prone to sunburns.

Are there makeups I can buy that include sunscreen?

I recommend using sunscreen in makeup only for incidental sun exposure during normal non-pool or non-beach days. As a rule of thumb, do not rely on sunscreen in your makeup to offer proper sun protection because it was intended for another purpose. When in the sun for prolonged periods of time, such as at the pool or at the beach, I recommend using a broad spectrum SPF 50 or greater sunscreen.

If I spritz my hair and scalp with SPF hair spray, am I protected?

The scalp can be a challenging area to apply sunscreens. In my opinion, spray sunscreens are often the best vehicle to use when applying sunscreens to hairy areas of the body.

Will wearing sunscreen make me sweat more?

No. Generally, wearing sunscreen will not increase the amount a person sweats, although everyone is different. There are some lighter formulations that do not feel as if they are blocking air flow. For the face, I recommend using a liquid sunscreen over a cream sunscreen.



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Cardiac Rehabilitation

Big Benefits With Perseverance: By Cardiologist Dr. Stuart Russell

You've just had heart surgery, and now your physician wants you to start exercising. Seriously?

Yes, says cardiologist Dr. Stuart Russell, M.D., Medical Director of Cardiac Rehabilitation, Heart Failure And Transplantation at Johns Hopkins in Baltimore, MD, USA. In fact, one of the best therapies after heart surgery or a heart attack doesn't come in a pill; it's actually a structured, supervised exercise program called Cardiac Rehabilitation. Cardiac rehab is also recommended for people who have undergone angioplasty or had a stent inserted, and for those who have heart failure.



What Does Cardiac Rehabilitation Involve?

Russell and other physicians typically prescribe cardiac rehab two to three times a week for 12 to 18 weeks beginning about a month after surgery or a cardiac event. Yes, it involves exercise, but it also includes nutritional counselling and support with making other lifestyle changes.

One often overlooked advantage, notes Russell: "You're in a setting with people who are in a similar position as you." That, in turn, provides psychological improvements in a way that exercising at a gym surrounded by fit twentysomethings doesn't"

Does Cardiac Rehabilitation Work?

The simple answer is yes. A review of 128 studies involving nearly 100,000 people who have had a heart attack, angioplasty or heart failure, found that those who

participated in cardiac rehabilitation were far less likely to be hospitalized and had much a better quality of life than those who did not. Other studies found lower rates of death in people who attended cardiac rehab, with the greatest benefit seen in those who attended the most sessions. Benefits also include weight loss, improved cholesterol levels, less stress and a lower risk of depression.

How Can You Boost Cardiac Rehabilitation Success?

Unfortunately, says Russell, physicians only refer about one in five eligible people to cardiac rehab—something that can significantly slow their recovery and affect their future health. While physicians can prescribe cardiac rehabilitation to every eligible patient, they can't force them to go—and many don't. Overall, only about half of the people referred to cardiac rehab complete the program, with women far less likely to finish than men.

Why don't they go? "They say they're too busy, or they can't get there because they work," Russell says. "But the vast majority of people with heart disease are retired." Basically, he says, "They don't like it. They'd rather take a pill." Plus, people with heart disease probably weren't exercising before they got sick, and the lack of physical activity contributed to their condition. "It's hard to change years of habit," he says.

To that end, Russell and Johns Hopkins colleagues are investigating ways to get patients to stick with cardiac rehab. One option: Tying it in with fitness trackers or smartphone apps that send reminders about appointments.

Even if you do complete cardiac rehab, you shouldn't stop exercising. Studies show that while the rehab itself is beneficial, you get even more bang for your exercise buck if you continue after it ends, Russell says.

"Sometimes you need more than a pill, and this is one of those times," says Russell. "The benefits of cardiac rehabilitation are equal to or better than anything you could get out of a pill."

"people with heart disease probably weren't exercising before they got sick, and the lack of physical activity contributed to their condition. It's hard to change years of habit."



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Stuart Russell, M.D.

Chief, Heart Failure and Transplantation
Associate Professor at Johns Hopkins Medicine

Dr. Stuart D. Russell, M.D. went to medical school at the University of Washington before coming to Johns Hopkins to do his Internal Medicine residency from 1991 to 1994. He then went to Duke University Medical Center for his Cardiology fellowship. After completing his fellowship, he went to UCLA Medical Center to do an additional fellowship in Advanced Heart Failure and Cardiac Transplantation. Dr. Russell then returned to Duke where he was the Medical Director of Cardiac Transplant and the Associate Director of Heart Failure until 1999. He came back to Johns Hopkins in 2004 to be the Chief of Heart Failure and Transplantation. Dr Russell is an Associate Professor of Medicine at Johns Hopkins, and Director of the new Heart Failure Bridge Clinic that provides multidisciplinary care to adults with heart failure reducing hospitalizations through intensified and readily available routine outpatient care and access including IV diuresis.

Dr. Russell's current research interests include his work in two primary areas: Left Ventricular Assist Devices (LVADs) and exercise physiology in heart failure. The newest pumps are commonly used in patients with end-stage heart failure as a bridge to transplant or instead of transplant all together. LVADs have interesting physiological properties that Dr. Russell is working hard to understand, to maximize its efficacy in patients.

Saudi Health Conference & Exhibition

Johns Hopkins Aramco Healthcare participated in the 2016 Saudi Health Conference & Exhibition held at the Riyadh International Exhibition and Convention Center on May 16-18. Held under the patronage of Saudi Arabia's Vice Minister of Health Affairs, Dr. Hamad Al-Dhewaila, the three day event highlighted Healthcare IT, Patient Safety, Talent Acquisition and Education & Research.



During the event Dr. Al-Dhewaila visited the JHAH exhibit and was given a tour by Dr. Abdulaziz Alghamdi, JHAH Medical Director, where he viewed messaging regarding JHAH Nursing, Medical Laboratory Technology, Radiology



Technology, Pharmacy, Respiratory Technology, Health Care IT, and Supply Chain and Marketing & Communications as well as met numerous JHAH personnel.

During the three day event, nearly 3,500 participants visited the JHAH exhibit, and the JHAH Recruitment Team remained busy. More than 3,000 contact cards were distributed, nearly 150 resumes were submitted and more than 130 interviews were conducted.

JHAH's mission to enhance health and wellbeing while maintaining an environment of quality, growth and learning was emphasized as was its vision to continue being a regional leader in patient and family experience and clinical results.



New mobile medications and health dashboard



To all Saudi Aramco Employees,

Johns Hopkins Aramco Healthcare in coordination with Saudi Aramco Information Technology is pleased to announce the Go-live of the following mobile medical applications.



Process Refills in pharmacy
To view and submit a refill request for you or your dependents to pharmacy



Request Prescription Renewal
To submit medication renewal request to physician.



Check Request Status
To check your refill and renew status.



Drug Information
To check your requested medication information.



Health Dashboard
To view your health test results, such as blood pressure and BMI.

Access it today at <http://mobile.aramco.com>

For business device users, please click on the myhome Mobile Portal icon located on the device.
For non-business device users, type the following URL <http://mobile.aramco.com>.

If you do not have access to myhome on the internet, please submit a CRM request as follows:
Go to: Service Catalog -> IT Services -> Email & Internet/Intranet Services -> myhome Corporate Portal Access.

For assistance, please contact: [IT Help Desk](#)

Healthy Recommendations for Men and Women

By JHAH Clinical Nutrition & Food Services Unit

Tips for Healthy Nutrition

- Lose excess weight and maintain a healthy body weight within accepted ranges.
- Consume well-balanced and nutritious meals by applying the "My Plate" model as shown below.
- Consume a minimum of 5 servings a day of fruits and vegetables for the daily requirement of vitamins, minerals and antioxidants.
- Fruits and vegetables are rich in fiber and support mental health, heart health, immunity and reduce the risks of some types of cancer. Whole grains, cereals and legumes are fiber rich and also help reduce the risk of some types of cancer.
- Drink adequate amounts of water and avoid dehydration.
- Limit saturated and trans-fat intake that are found in butter, processed and fatty meat, full cream dairy products, palm oil, coconut oil and ghee. Use healthy oils in moderation such as olive oil, canola oil and sunflower oil.
- Avoid smoking (active and passive) and alcoholic drinks
- Consult a physician for diabetes, high blood pressure or dyslipidemia concerns and keep blood sugar levels, blood pressure and lipid levels under control.



- Moderate salt consumption and limit your intake of highly salted foods such as,
 - Pickles, sauces, dressings, chips, olives
 - Canned meat and canned soup
 - Use unsalted nuts instead
- Support healthy bones by consuming foods rich in calcium & vitamin D, such as
 - Low fat or non-fat dairy products
 - Sardines with bones
 - Fortified cereals
- It's important to practice regular exercise (aerobic and strength) and expose yourself to sunlight for at least 15 minutes a day to get vitamin D. Sunlight exposure is ineffective through clothes or windows or after applying sunblock creams.



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Your Voice Has the Power of Change

We have partnered with Health.Links / Press Ganey, the leading company in evaluating hospital services, to help us improve. We ask your cooperation in answering the survey you may receive (via phone or SMS) to evaluate your visit. Your participation in the survey is optional. All information will be kept confidential, and your responses will not be disclosed to caregivers



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For us to communicate with you easily, kindly update your contact information to ensure that you regularly receive our news.

Please make sure to update your mobile number at reception during your visit to any of our clinics.

Cultivating the Next Generation of Care Givers JHAH Summer Students Have Arrived



Omar, Yasir, and Abdurehman are excited to begin their eight-week medical summer program at JHAH. They are looking forward to learning more about Pediatrics as their chosen specialty. Applications for next year's summer program are available in February 2017. Visit www.JHAH.com for more information.

JHAH Bulletin Board

Emergency Numbers: SAVE THESE NUMBERS TO YOUR MOBILE PHONE

- Dhahran and all areas: From a land line inside Saudi Aramco dial 110 for security for ambulance or fire. From outside Saudi Aramco, dial 997 for ambulance and 998 for fire.
- Abqaiq: From your mobile phone inside Abqaiq, dial +966-13-572-0110.
- al-Hasa: Dial 997 for ambulance and 998 for fire.
- Ras Tanura: From your mobile phone inside Ras Tanura, dial +966-13-673-0110.
- 'Udhailiyah: From your mobile phone inside 'Udhailiyah, dial +966-13-576-7110.
- Help with your health care: Contact Patient Relations at PatientRelations@JHAH.com or call 800-305-4444 In Kingdom or +966-13-877-3888 out of Kingdom.
- Urgent health care access helpline for MDF patients dial +966-55-600-0468 (after 4 p.m.).

If you have an immediate medical concern, make an appointment with your Primary Care physician. In the event of a medical emergency, go to the Emergency Room at the nearest hospital.

- Appointments: To make medical or dental appointments and to access multiple medical services, call:
 - Centralized Call Center 800-305-4444
 - Out of Kingdom +966-13-877-3888
- Feeling Stressed? Have psychological, emotional or social problems? Call Community Counseling Clinic for an appointment +966-13-877-8400.
- Quit Smoking: JHAH help for employees, dependents, contractors and retirees to quit smoking, email SmokingCessation@aramco.com.
- Become a volunteer: To volunteer, email VOLUNTEER.HEALTHCARE@JHAH.COM. You must be in good health, at least 18 years old and have a good understanding of English.
- Pregnant? Attend the Pregnancy Wellness Program in Arabic or English. Email registration: MedicalPregnancyWellness@exchange.aramco.com.sa You must be 12 weeks or more into a pregnancy.
- Register for the Mother and Baby Unit Pregnancy Tour in Arabic or English. The tour starts at 1 p.m. on the 1st and 3rd Tuesday of the month. To register, email Eman.Mutairi@JHAH.com. You must be 30 weeks or more into your pregnancy. For more information about both programs, visit <http://JHAH > Health Education > Calendar of Health Care Events > Programs>.

- SMS Reminder: Never miss a medical/dental appointment. Register for the SMS reminder service. Update your mobile number on the Corporate Portal at <http://myhome > myInformation > Medical > Maintain SMS Reminder Details>.
- Dependents call 800-305-4444 to activate or deactivate the SMS reminder service and update a mobile number. SMS reminders are sent 48 hours prior to an appointment to all patients who are registered for the service and have booked their appointment at least 48 hours prior to the appointment.

Employee Online Access to Medical Services

- myhome Corporate Portal: <http://myhome > myInformation > Medical>.
- Campaigns and Programs online: <http://JHAH > Health Education > Calendar of Health Care Events>.
- Community Counseling Clinic: <http://JHAH > A-Z Services > Mental Health website>.
- Patient Relations: <http://JHAH > A-Z Services > Patient Relations>.
- Patient Relations is available to help with issues that you are unable to resolve with specific clinical areas.
- News from Medical Online: <http://JHAH > Announcements: What's New in Medical>.
- Al-Midra Wellness Center offers consultations, lifestyle wellness coaching and health screenings (Mon to Wed 1-3:30 p.m.) and other services including Blood Donations (Mon and Wed 8 a.m. - noon) and Pharmacy (Sun to Thurs 12-4 p.m.). For more information visit <http://JHAH > A-Z Services > Al-Midra Wellness Center>.
- MDF Patients: View the MDF list of contacts and website links on <http://JHAH > Hospitals and Clinics Contacts > MDF>.



Do you need help with a health care service issue?

Email Patient Relations
PatientRelations@JHAH.com

Take Action, Save a Life

JHAH brings basic life support techniques to North Park



"I was in a gym once. A man exercising suddenly collapsed, and it looked like he might have had a heart attack. People rushed to his aid and someone administered CPR. He was a large man so the chest compressions performed on him had to be quite intense. The victim regained consciousness and was rushed to the ER. It was discovered that it was not a heart attack but a case of low blood sugar triggered by him missing a meal.

However, that wasn't the end of the story. The victim didn't simply go back to his regular routine, instead, he had to come back repeatedly to the hospital to get treatment for the severe bruising that resulted from the CPR's enthusiastic chest compressions."

This is how Mohammed D. Shammari, Manager of Saudi Aramco Contracting Department, opened the Basic Life Support (BLS) Workshop that was held at North Park on May 5, 2016. During the introduction, Shammari shared a story that showed how knowing how the administration of basic life support can save a life, the importance of knowing the correct methods of basic life support and how applying those methods incorrectly can also cause unnecessary physical damage.

The workshop was presented by Dr. Basem Bahrani, ER Consultant and Head of the Johns Hopkins Aramco Healthcare (JHAH) Emergency Medical Services in Dhahran. Dr. Bahrani set the stage by explaining that the workshop is a basic introduction, and he encouraged the participants to register for the more detailed course offered by JHAH. During the workshop, Dr. Bahrani shared and highlighted



the importance of knowing emergency numbers and demonstrated how to assess a collapsed victim and to perform chest compressions, placing an unconscious breathing victim in the recovery position; how to move an injured person; and how to deal with a choking victim. He also demonstrated the difference in dealing with adult and infant choking victims. In addition, Dr. Bahrani showed the audience how to operate an Automated External Defibrillator (AED).

"I have seen too many victims from home incidents and road accidents with damage that could have been minimized or even avoided if people had practiced proper safety measures and knew a few basic life support techniques," said Dr. Bahrani. "There is nothing harder than losing a loved one especially when it could have been prevented."

"CPR saves lives and yet it is not delivered enough," stated Salam Al-Mahdi, Contract Representative, "My goal when I contacted JHAH and arranged for the workshop, was to show my colleagues how uncomplicated it is to learn basic life support techniques and in doing so, preventing future tragedies that can result from lack of knowledge." Al-Mahdi expressed how great it was to see that the workshop was attended by so many interested employees and hoped that they will in turn spread the message of how essential it is to learn basic life support.



How can Saudi Aramco employees, dependents and contractors register for a BLS course at JHAH?

Health Promotion offers courses to Saudi Aramco employees in the following:

- Automated External Defibrillator (AED)
- HeartSave / First Aid with Cardiopulmonary Resuscitation (CPR) for adult, children and infants
- Courses are offered in Arabic and English. All employees and contractors must register through their training coordinator.

How to register?

Follow the below navigation and choose your category:

<http://jhah> > Health Education > First Aid, AED and CPR course (saveWell)



Don't Stand by, Take Action and Save a Life Educating the Youth on BLS

One of the worst things that can happen in an emergency to someone who can help others is panic. Panic can freeze you both physically and mentally, and instead of rendering help, a person stays rooted in position. In some incidents, the panic lasts for a few seconds but in an emergency, seconds can literally mean life or death.

So how do you counteract panic? With knowledge and training. Knowledge and the right training can save a life whether you're an adult or a teenager.

Adolescents and young adults can sometimes even be more susceptible to panic than their older counterparts and as such need as much training, if not more. In an effort to spread the message of the importance of learning basic life support skills, Dr. Basem Bahrani presented a BLS workshop, hosted by the Wall Street English Institute on June 27, 2016.

The workshop covered the general aspects of BLS including assessing collapsed victims, moving an injured person, placing unconscious breathing victims in recovery positions, performing chest compressions, and dealing with adult and infant choking victims.

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Name: Work at: Location:

Speaks: Language: Work with: Speciality:

Who is: Gender:

Choosing your Primary Care Physician

If you are registered to receive your healthcare with Johns Hopkins Aramco Healthcare (JHAH) and wish to change or choose your Primary Care Physician please contact: PatientRelations@JHAH.com

Physician Name: Dr. Amar Raza Sattar

Professional Title: Family Practice Specialist

Specialities: Primary Care

Work at: Ras Tanura

Physician Profile

Physician Name: Dr. Amar Raza Sattar
Professional Title: Family Practice Specialist
Specialities: Primary Care
Work at: Ras Tanura
Gender: Male
Languages: Arabic, English, Urdu

Educational and Professional Highlights

2016 - Present Unit Head, RT General Practice Group, Saudi Aramco Medical Services Organization/Johns Hopkins Aramco Healthcare

2012 - 2015 Family Medicine Specialist, Saudi Aramco Medical Services Organization/Johns Hopkins Aramco Healthcare

2006 - 2012 Family Practice Partner, Riverside Surgery High Wycombe Buck

Education and Training

Medical School:

2002 Manchester Medical School, Victoria University of Manchester, United Kingdom

Residency:

2003 - 2006 Family Practice Specialist, Oxford Deanery, Buckinghamshire Hospital Trust

Residency Foundation Training: Stoke Mandeville Hospital, Buckinghamshire

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Physician directory is now available on www.jhah.com—JHAH's public-facing website

The JHAH Physician profiles are now live on the external website www.JHAH.com. This represents the successful completion of Phase 2 of the project, following the initial launch of the directory on the JHAH internal website earlier this year.

The online physician directory makes it easier for our patients to learn more about their primary care, dental or specialist physicians' professional background and expertise prior to attending a medical appointment.

A well-functioning directory requires set up of approximately 200 profile pages plus main and filtered overview pages. The development phase included building a functioning information architecture and creating the search engine function for the required filters (name, gender, specialties, location, and languages). The successful outcome was achieved with a highly collaborative working team. The website development and build was handled by multidisciplinary JHAH staff and executed in consultation with Saudi Aramco IT and JHI (including practical advice on end-user experience from the JHM website team managing the JHM Physician Directory).