

Letter from a Breast  
Cancer Survivor

01

Answers from Experts on  
Breast Cancer

04

Mindfulness and  
Wellbeing

18

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Johns Hopkins  
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# WellBEING

2017 Breast Cancer  
Special Edition

WE  
FIGHT  
CANCER  
TOGETHER



# INSIDE THIS ISSUE

Letter from a Breast Cancer Survivor	1
The Fight Against Breast Cancer	2
Calendar of Breast Cancer Events	3
Answers from Experts on Breast Cancer	4
Five Mammogram Myths	6
Nutritional Tips for Reducing the Risk of Breast Cancer	8
Healthy JHAH Antioxidants-Rich Recipe	9
JHAH Health Encyclopedia	10
Be the First to Know, Follow JHAH on Twitter	11
JHAH Timeline, celebrating three years of accelerated growth	12
JHAH Highlights	14
2017 Summer Volunteer Activities Program Closing Ceremony	15
Graduation of the Inaugural Johns Hopkins Aramco Healthcare Doctorate of Nursing Practice Cohort - A First in the Kingdom of Saudi Arabia	16
Mindfulness and Wellbeing	18
Your 2017 Annual Health Assessment	19
Distinguished Faculty Visitor Program Promotes Two-way Transfer of Knowledge Between JHM and JHAH	20
Distinguished Faculty Visit: Dr. Harpal Khanuja	21
Connect with JHAH	22
The Nurse Care Line	22
JHAH Bulletin Board	23
Five Reasons Why JHAH's OR Patient & Family Spaces have Enhanced Care for Patients and Families	24



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# Letter

## From a Breast Cancer Survivor



### *My journey through breast cancer*

It all started on March 15, 2015, when I was preparing to go to work. After my bath, I was putting on body lotion when I felt a lump in my right breast. I often check my breasts and I knew that the lump had not been there before. Since I had already had surgery twice on my left breast for removal of fibroadenomas, I knew that this was different. I went to the staff clinic to have it checked. I was told to have a mammogram and an ultrasound, and after that I was called in for a biopsy. During the biopsy, I tried to think positive, though I knew this was different than previously.

I was trying to be strong in front of others, but when I went home I felt like my whole world had just collapsed on me. All I had in my mind was, what will happen to my children? They are still young. My eldest was nine years and my youngest was 18 months old at the time. Though the

biopsy result was not available yet, I knew in my heart that it would be positive. I told myself that I had to prepare for the eventual outcome.

The biopsy result was going to take two weeks, so I went home to the Philippines to be with my family. Unfortunately, while at home, I developed an infection in my breast. I saw a doctor, who gave me some antibiotics. Unfortunately, the treatment did not help, and the infection remained. At the end of the two weeks with my family, I returned to Saudi Arabia.

On the same day that I returned, I went straight to Emergency with my friends because my breast had become swollen. I was admitted and told I had developed cellulitis, which is rare in this type of case. I was given more antibiotics and underwent an excision and drainage of the abscess from my breast. There was no pus, but there was some necrosis. After a few days, I went home

to recover, but the cellulitis did not heal well and I could not go ahead with my planned breast surgery.

At the same time, the biopsy result confirmed the presence of cancer. According to my doctor, it was not possible to perform the operation because my skin was not healthy and, if the operation went ahead, something worse might occur. After a consultation with one of the oncologists, I was started on chemotherapy, which would help heal the cellulitis and control the cancer. Meanwhile, I developed another infection and was admitted to hospital again.

I continued with my treatment and, after eight cycles of chemotherapy, I was scheduled to have my surgery. I underwent a double mastectomy, then radiotherapy, and followed my Herceptin treatment for one year.

Now, I am officially a breast cancer survivor!

I can say that, having faced all of this, I thank my friends who are always there for me, and my family who are very supportive, even though they are far away.

During all the time that I was undergoing surgery and treatment, I never told my eldest son. I didn't want him to be depressed and worried about me. When I went home after my last treatment, I talked to him and told him everything.

Grace Mission

# The Fight

## Against Breast Cancer

By: **Angela Wilkins-Bassett**  
Family Nurse Practitioner



October is breast cancer awareness month. This month around the world health campaigns focus on educating people about the prevention and treatment of breast cancer. Breast cancer is a disease that occurs when breast tissue multiples and grows out of control forming a lump or tumor. Most breast cancers occur due to breast tissue aging. Less than 10% of the cases are from inherited breast cancer genes. Breast cancer occurs in men and women, but the majority of cases occur in women over the age of 60.

### The Bad News

- Breast cancer is the most commonly diagnosed type of cancer in women.
- In 2016, it is estimated that worldwide more than 250,000 women will be newly diagnosed with breast cancer and more than 40,000 will die from the disease.
- In the Kingdom of Saudi Arabia, breast cancer accounts for nearly 16% of all new cancer cases. Nearly 3,000 women were diagnosed with breast cancer in 2012 alone.

- It is estimated that nearly 13% of women will be diagnosed with breast cancer sometime in their life. (SEER, 2016).

### The Good News

- If detected early, most women have a long and healthy life. The five year survival rate of women diagnosed with breast cancer early is 90% (SEER, 2016). The survival rate depends on what stage the cancer is in when it is detected; therefore, early detection is important.
- Breast cancer is rare among young women. Most women are diagnosed with breast cancer in their 60s (SEER, 2016).
- Women aged 50-69 benefit the most from screening mammograms with early detection key to the prevention of breast cancer (Weedon et al, 2014).

### How to Fight Breast Cancer

- Talk to your physician about breast cancer screening. Screening mammograms can be an important tool to detect breast cancer early. Depending on your age and risk factors, your physician will recommend an appropriate screening strategy.
- Avoid alcohol and get plenty of exercise. Alcohol intake, inactivity, and obesity increase the risk of breast cancer.
- Seek medical advice promptly if you have breast pain, skin changes, nipple discharge, or masses.
- Mammograms and other tests are available at JHAH. Please contact your primary care provider to discuss which test is best for you.



The fight against breast cancer has come a long way since mammograms were first introduced in the 1950s. Breast cancer is being detected earlier and more lives are being saved. Much work is still needed to prevent and treat breast cancer, and women play a big part in the fight. Understanding how to prevent breast cancer is important for the entire community to keep our mothers, wives, and daughters safe and healthy.

# *This Month's*

## *Calendar of Breast Cancer Events*

### Breast Care Awareness Campaign October 2017

Date	Event	Booth
Thursday 5	Country Club Pink Dance in Dhahran Community 7 - 10 p.m.	
Thursday 12		Dhahran Primary Care Clinic 9 a.m. - 1 p.m.
Tuesday 17	Pink tea with Dhahran Women's Group in Dhahran Community 8:30 - 10:30 a.m.	
Thursday 19	Run for Cancer BMX track Dhahran Community 5 - 8 p.m.	
Saturday 21	Tennis Club: Play for cancer in Dhahran Community 5 - 8 p.m.	
Tuesday 24		Al-Midra 9 a.m. - 1 p.m.
Thursday 26		Al-Hasa Health Center 9 a.m. - 2 p.m.
Saturday 28	Pink golf medal event 7 a.m. - 4 p.m.	

# Breast Cancer

*Answers from Experts Dr. Susan Harvey and Dr. David Euhus*



Dr. David Euhus of the Johns Hopkins Breast Center and Dr. Susan Harvey of Johns Hopkins Imaging answer questions on when to begin scheduling a mammogram, what to do if you recognize a breast cyst and more.

## **I know several people in their 30s with breast cancer. Why are we told not to get mammograms until we are 40?**

The incidence of breast cancer is strongly related to age. As we get older, our risk increases. While women get breast cancer in their 30s, screening the entire population in their 30s likely would not provide the intended benefit of early diagnosis.

## **Is there any risk in having breast mammograms?**

To our knowledge, for those over the age of 30, there is no evidence that the radiation exposure of a mammogram increases breast cancer risk.

## **Are cysts in the breast dangerous?**

There are many different types of cysts. Most are called simple cysts and are not related to breast cancer or the risk of breast cancer. The best way to evaluate cysts is with an ultrasound of the breast.

## **Should all women get an ultrasound and a screening mammogram yearly?**

The screening guidelines that we follow recommend annual mammograms beginning at age 40. This may be different for high-risk women. The use of ultrasound as a supplement to a screening mammogram depends on several factors.



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### **Susan Harvey, M.D.**

*Director, Johns Hopkins Breast Imaging Section  
Assistant Professor of Radiology and Radiological Science*

Dr. Susan C. Harvey is the director of breast imaging at Johns Hopkins. She is board certified in diagnostic radiology and is affiliated with Sibley Memorial Hospital, Johns Hopkins Hospital and Johns Hopkins Bayview Medical Center. She practices out of locations around Washington, D.C. and Maryland.

Dr. Harvey has a wide range of expertise in the field of breast imaging, including breast biopsies, breast cancer, diagnostic radiology, mammography, stereotactic biopsy, tomosynthesis and ultrasound.

Dr. Harvey earned her undergraduate from Middlebury College and her medical degree from University of Vermont. She completed an internship in internal medicine and a residency in diagnostic radiology at Yale New Haven Hospital, followed by a fellowship in oncoradiology at the Brigham and Women's Hospital and a fellowship in breast imaging and the treatment of breast diseases at the Dana Farber Cancer Institute. Dr. Harvey joined Johns Hopkins in 2005 and she began serving as the director of breast imaging at Johns Hopkins Imaging site in Green Spring Station in 2008.

Dr. Harvey is a member of the American College of Radiology, the American Roentgen Ray Society and the Society of Breast Imaging, Johns Hopkins.



### **David Euhus, M.D.**

*Director, Breast Surgery  
Professor of Surgery*

David Euhus, M.D., joins the Department of Surgery as chief of breast surgery in the Division of Surgical Oncology. He comes to Johns Hopkins from University of Texas (UT) Southwestern Medical Center, where he was the Marilyn R. Corrigan Distinguished Chair in breast cancer surgery and co-director of the Mary L. Brown Breast Cancer Genetics and Risk Assessment Clinic in the Center for Breast Care.

Dr. Euhus has dedicated his career to understanding breast cancer at the molecular level to determine the most effective treatments for it and will continue this work at Johns Hopkins. His research has included using fine needle aspiration to evaluate DNA for acquired changes that lead to a higher risk of breast cancer, as well as examining the link between high blood glucose or higher body mass indexes and breast cancer. His research on breast cancer genetics and defining biomarkers for breast cancer help define who should be tested for genetic risk of breast cancer and how to proceed upon finding a genetic link.

In addition to his special interest in the treatment of high-risk patients with genetic predisposition or familial history of breast cancer, Dr. Euhus specializes in breast surgery procedures that include nipple-sparing mastectomy and hidden incisions to reduce visible scarring.

# 5 Mammogram Myths



Think it's not a big deal skipping your annual mammogram this year? Are you concerned that a mammogram uses too much radiation? A yearly mammogram for women 45 and older helps to detect breast cancer earlier, leading to less-aggressive treatment and a higher rate of survival.

Here are five common mammogram myths you may believe could have a serious impact on your long-term health. Learn the truth about this lifesaving screening exam.

**Myth #1 I don't have any symptoms of breast cancer or a family history, so I don't need to worry about having an annual mammogram.**

**Fact:** The American College of Radiology recommends annual screening mammograms for all women older than 45, regardless of symptoms or family history. "Early detection is critical," says Dr. Susan Harvey, director of the Johns Hopkins Radiology and Radiological Science breast imaging section in Baltimore, Maryland, USA. "If you wait to have a mammogram until you have symptoms

of breast cancer, such as a lump or discharge, at that point the cancer may be more advanced and may no longer be curable." According to the American Cancer Society, early-stage breast cancers have a five-year survival rate of 99 percent. Later-stage cancers have survival rates of twenty-four percent. Ninety percent of women who have breast cancer have no family history. "Most breast cancers are spontaneous genetic changes that occur in the individual and are not necessarily due to family history or a breast cancer gene," says Harvey.



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### **Myth #2 A mammogram will expose me to an unsafe level of radiation.**

**Fact:** “While a mammogram does use radiation, it is a very small amount and is within the medical guidelines,” says Harvey. Because mammography is a screening tool, it is highly regulated. A mammogram is safe as long as the facility you go to is certified by the regulating agencies. There is constant background radiation in the world that we are exposed to every day. The radiation dose from a mammogram is equal to about two months of background radiation for the average woman.

### **Myth #3: A 3-D mammogram is the same as a traditional mammogram.**

**Fact:** Three-dimensional mammography, or tomosynthesis, is the most modern screening and diagnostic tool available for early detection of breast cancer. Compared with a standard 2-D mammogram, a 3-D mammogram displays more images of the breast and in thin sections of breast tissue. “3-D mammograms provide us greater clarity and the ability to determine the difference between normal tissue and cancer,” says Harvey. “With 3-D mammography, the data show a 40 percent increase in detecting early cancer and a 40 percent decrease in false alarms or unnecessary recalls from screening.”

### **Myth #4: If I have any type of cancer in my breast tissue, a screening mammogram is guaranteed to find it.**

**Fact:** “While annual mammograms are very important for women, there are limitations,” says Dr. Harvey. This is mostly due to dense breast tissue—the denser the breast, the more likely it is that a cancer will be hidden by the tissue. “Normal breast tissue can both

hide a cancer and mimic a cancer,” says Dr. Harvey. Other imaging methods can be used for women with dense breast tissue, such as 3-D mammography, breast MRI or breast ultrasound, to obtain additional images.

### **Myth #5: I had a normal mammogram last year, so I don’t need another one this year.**

**Fact:** Mammography is detection, not prevention. “Having a normal mammogram is great news, but it does not guarantee that future mammograms will be normal,” says Dr. Harvey. “The largest trials in history have shown a 33 percent decrease in death from breast cancer in women older than 45 who had regular screening mammograms.”



# Nutritional Tips

## for Reducing the Risk of Breast Cancer



Proper nutrition and exercise play important roles in reducing the risk of breast cancer. To reduce breast cancer risk, healthy and well-balanced meals should include the following:

- Consume more non-fat or low-fat dairy products.
- Consume whole grains, unsweetened cereals and cooked legumes, including beans and lentils as they are rich in fiber.
- A minimum of five servings of fruits and vegetables, preferably fresh and, in particular, the ones with bright colors, are recommended to be consumed every day, including oranges, sweet melons, watermelons, strawberries, red grapes, green grapes, grapefruit, squash, tomatoes, spinach, cauliflower, cabbage, carrots, green peppers and broccoli. These provide antioxidants that reduce the risks of breast cancer in addition to other health benefits.
- Consume lean protein, such as lean meat, fish, tuna and skinless poultry.
- Healthy oils, such as olive oil and canola oil. Healthy oils should be used in moderation.
- Consume nuts, in particular almonds and walnuts, as they contain anti-cancer nutrients.
- Some studies recommend consuming soy products, such as soy milk and soybeans, as they play a protective role against breast cancer. Other studies recommended adding turmeric spice to foods for the same reason.

### Other tips to reduce the risk of breast cancer and other cancers

- **Avoid obesity:** Women are advised to maintain a healthy body weight by consuming well-balanced meals and exercising regularly as obesity increases the risk of breast cancer.
- **Importance of exercise:** Women who exercise daily for 30-45 minutes have a lower risk for cancer than those who lead a sedentary lifestyle.
- **Limit the intake of sugar and refined carbohydrates:** such as sweets and sugar-sweetened drinks and sodas. It is healthier to replace the sweets with fresh or dried fruit.
- **Importance of vitamin D:** Vitamin D deficiency can increase the risk of breast cancer. Women should consume low-fat or non-fat dairy products that are fortified with Vitamin D. Other food sources of Vitamin D include egg yolk, salmon fish, sardines with bones and fortified cereals. Direct exposure to sunlight for 15 minutes a day is encouraged to meet Vitamin D minimums. Exposure to sunlight through glass windows, clothes or after applying sun block creams does not permit Vitamin D absorption.
- **Importance of breastfeeding:** Women who breastfeed their babies have a lower risk for breast cancer than women who do not breastfeed.

### General Health tips

- Limit foods cooked or prepared at high temperature, as high temperature increases the risk of cancer
- Limit the consumption of burned and charcoal grilled foods.
- Limit excessive intake of red meat.
- Limit the intake of canned meat, processed meat, sausages, pickled and smoked foods.
- Avoid alcohol.
- Avoid (active or passive) smoking.

# Maklooba

## Antioxidants-Rich Healthy JHAH Recipe



### Preparation:

- Wash the rice and soak it in warm water for 30 minutes.
- In a large skillet, sauté the onion and garlic in canola oil until it is a golden brown.
- Add the lamb, spices, pepper, turmeric, cinnamon, bay leaves and nutmeg then brown the meat for 10 minutes, regularly turning it.
- Add water to cover the lamb and cook for two hours at low heat or until the lamb becomes tender. Remove the lamb from the broth and set it aside for later use.
- Marinate the eggplant slices and cauliflower strips with vinegar and lemon juice for a few minutes, then wash them with water to remove the bitterness.
- Drain them with paper towels.
- Steam the remaining cauliflower strips.
- Bake the eggplant slices in a greased baking pan with a little canola oil at 400 °F, or until golden brown on both sides.
- Arrange the tomatoes on the bottom of the pot and layer the lamb on top of the tomatoes.
- Layer the baked eggplant slices and steamed cauliflower strips on top of the lamb then add the rice on top of the eggplant and cauliflower. Shake the pot gently to spread the rice evenly in the dish and press it down with a spatula.
- Pour the broth over the rice until completely covered. Add water, as needed.
- Cover the pot tightly, cook on high heat for five minutes then simmer it for 45 minutes over low heat until the rice is tender and the liquid is absorbed.
- Remove the lid and place a large round platter over the pot and carefully flip the pot onto the platter turning the dish “upside down.”

Maklooba is a delicious and nutritious dish that includes lean meat, numerous vegetables and healthy spices that are high in protein, vitamins, minerals, antioxidants and fiber. The ingredients are stacked artfully in a pot then after it is cooked, the dish is turned upside-down onto a serving platter, revealing the pattern of colorful vegetables, meat and rice.

### Ingredients (6 Servings):

- 750 grams (¾ kilogram) of lean, boneless lamb, cut into pieces
- 2 large eggplants, cut into horizontal slices, ½ inch thick
- 1 cup cauliflower, cut into strips
- 5 large tomatoes, sliced
- 1½ cups of long grain rice
- 2 onions and 3 cloves of garlic, chopped
- 1 teaspoon cinnamon, ground
- 1 teaspoon cumin, ground
- 1 teaspoon turmeric, ground
- 2 bay leaves
- 1 teaspoon fresh nutmeg, grated
- 1 tablespoon of “All Spice”
- 1 tablespoon canola oil
- Black pepper to taste, ground
- 5 cups of water

### Fat and Calorie Contents (per serving):

- Calories: 225
- Fat: 5 grams

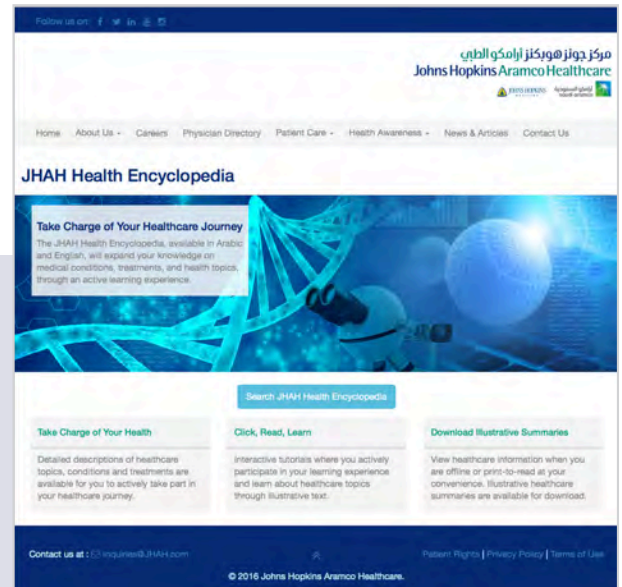
### Health Profile:

Maklooba is appropriate for people with heart disease. It is a healthy dish for children, pregnant and lactating women and seniors. People with diabetes can eat maklooba considering that 1/3 cup of rice = 1 serving of carbohydrates.

# JHAH Health Encyclopedia

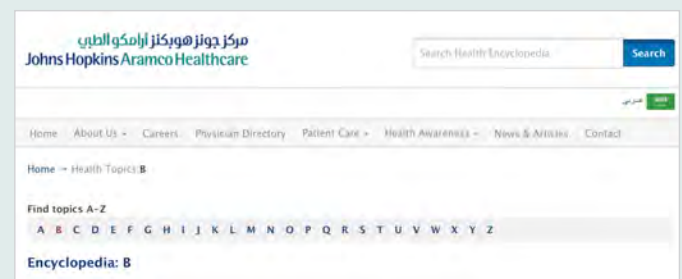
## Take Charge of Your Healthcare Journey

JHAH offers our patients and their families the online Health Encyclopedia. A bilingual health and wellness knowledge center. The online 'Health Encyclopedia' is a comprehensive educational resource containing easily searchable information, interactive tutorials and illustrated downloadable hand-outs. To access the Health Encyclopedia, from your computer or mobile device, please visit [www.JHAH.com](http://www.JHAH.com), select Health Awareness from the menu and then click Health Encyclopedia.



## Four Simple Steps to Know More About Breast Cancer

1. Visit [www.JHAH.com](http://www.JHAH.com)
2. Click on "Health Awareness" tab > [Health Encyclopedia](#)
3. Click "Search JHAH Health Encyclopedia" button
4. Select letter "B" and scroll down to Breast Cancer topic



### Breast Cancer

#### Overview

Breast Cancer affects one in eight women during their lives. Breast cancer kills more women in the United States than any cancer except lung cancer. No one knows why some women get Breast cancer, but there are a number of risk factors.

Risks that you cannot change include

- Age - the chance of getting breast cancer rises as a woman gets older.
- Genes - there are two genes, BRCA1 and BRCA2, that greatly increase the risk. Women who have family members with breast or ovarian cancer may wish to be tested.
- Personal factors - beginning periods before age 12 or going through menopause after age 55.

Other risks include being overweight, using hormone replacement therapy (also called menopausal hormone therapy), taking birth control pills, drinking alcohol, not having children or having your first child after age 35 or having dense breasts.

Symptoms of breast cancer may include a lump in the breast, a change in size or shape of the breast or discharge from a nipple. Breast self-exam and mammography can help find breast cancer early when it is most treatable. Treatment may consist of radiation, lumpectomy, mastectomy, chemotherapy and hormone therapy.

Men can have breast cancer, too, but the number of cases is small.



#### Breast Cancer

- Breast Cancer - Hormonal and Targeted Therapies
- Breast Cancer Surgery
- Breast Changes and Diseases
- Breast Lift
- Breast Lumpectomy and Sentinel Lymph Node Biopsy
- Breast Lumps Biopsy
- Breast Milk Storage
- Breast Reconstruction
- Breast Reduction



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# كن أول من يَعْلَم

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# JHAH Timeline

*Celebrating three years of accelerated growth*

<p>Inauguration ceremony of <b>Johns Hopkins Aramco Healthcare</b> - the only health system outside of the U.S. to feature the Johns Hopkins name.</p>	<p><b>January 2014</b></p>	<p>First annual JHAH international patient safety conference</p>	<p><b>January 2015</b></p>	<p>First patient satisfaction survey</p>	<p><b>November 2015</b></p>	<p>Opening of the new Al-Hasa Emergency Room and fast track (urgent care) facility.</p>	<p><b>January 2016</b></p>
		<p>Held in collaboration with the Johns Hopkins Armstrong Institute for Patient Safety and Quality and the King Fahad Specialist Hospital (Dammam).</p>		<p>Our monthly survey tracks patient experience across JHAH, providing a new way of understanding and delivering patient and family-centered care and improving measurement and mentoring.</p>		<p>The extension of JHAH 2016 job offers to our seconded Saudi Aramco employees.</p>	<p><b>May 2016</b></p>
<p>مركز جونز هوبكنز أرامكو الطبي <b>Johns Hopkins Aramco Healthcare</b></p> 						<p>Commencement of an enhanced endovascular surgery program</p> <p>JHAH introduced a new minimally invasive technique called an endovascular aortic repair, along with a clinical rotation schedule, which allows complex surgeries to be performed.</p>	<p><b>January 2016</b></p>

<b>2014</b>	<b>2015</b>	<b>2016</b>
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<p>The official start of operations JHAH legally assumes responsibility for providing care to Saudi Aramco healthcare beneficiaries ~ 355,000 people.</p>	<p><b>May 2014</b></p>	<p>JHAH launches the kingdom's first doctorate of nursing practice program</p>	<p><b>August 2015</b></p>	<p>Launching a robotic surgery program in urology - the first surgeries in the kingdom using the latest da Vinci Robotic Surgical System</p>	<p><b>December 2015</b></p>	<p>Integrating two advanced robotic medication dispensing systems in JHAH's pharmacy</p>	<p><b>May 2016</b></p>
<p>JHAH MERS-CoV response contributes to well-being in the kingdom JHAH medical personnel and Saudi Aramco staff have proudly worked with the Saudi government and other partners to advance the kingdom's infection control, response infrastructure and public health policy.</p>	<p><b>2014</b></p>	<p>Empowering and training tomorrow's nursing leaders Johns Hopkins University School of Nursing enrolls 13 nurses for a two-year program.</p>		<p>At launch, JHAH and JHM surgical teams collaborated to perform a prostate surgery, followed by a kidney procedure.</p>		<p>The first in the Gulf region and only the second advanced robotic medication system outside of the U.S. This reduced waiting time for patients, increased patient satisfactions and augmented patient safety.</p>	
<p>The Health Risk Assessment Survey begins JHAH's journey to a population health model JHAH issues the first annual Health Risk Assessment survey (HRA) to all Saudi Aramco employees.</p>	<p><b>December 2014</b></p>						

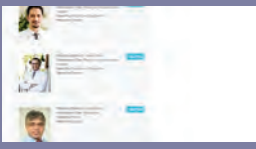


**June 2016**

Inauguration of a state-of-the-art Emergency Medical Services (EMS) in 'Udhailiyah

The new EMS doubled the capacity of the previous service from seven to 14 beds and expanded the old site, which served the community for more than 40 years.

**June 2016**



**February 2017**



**March 2017**

JHAH performs first bone marrow transplant

JHAH became the second Eastern Province hospital to perform bone marrow transplants.



**March 2017**

New JHAH service: cornea surgery

Using deep anterior lamellar keratoplasty to remove the damaged layers of the cornea and leave the innermost endothelial layer to restore vision.



**July 2017**

Revitalized Al-Hasa Health Center inaugurated by Saudi Aramco CEO

July 19 - Amin Al-Nasser, Saudi Aramco president and CEO, conducted the ribbon cutting at the official inauguration ceremony for Al-Hasa Health Center, the second hospital of Johns Hopkins Aramco Healthcare (JHAH).



# 2017

**October 2016**

JHAH launched its medical residency program

The Saudi Commission for Health Specialties accredited JHAH's pathology, pharmacy, emergency, anesthesia and family medicine services as training centers in May 2016. JHAH welcomed the first medical residents in October the same year.



**March 2017**

First JHAH fellowship training accreditation

Saudi Commission for Health Specialties accredits JHAH as an Adult Oncology Fellowship Training Center.

**April 2017**



JHAH launches cardiac surgery with multiple surgeries

Dr. Harry Parissis led the launch phase for the Cardiac Surgery Program. His team commenced the first of multiple surgeries on April 17.

**May 2017**

A unified workforce

May marked the official end of the transition phase. 83% of seconded Saudi Aramco employees joined JHAH, and comprise nearly 80% of the workforce.

**April 2017**

Advanced Linear Accelerator

One of the world's most advanced linear accelerators was used at JHAH Cancercare for the first time on April, 2017. The linear accelerator uses image guided radiography and respiratory gating, this technology allows for greater precision and accuracy, and for patients to be exposed to the energy beam for a shorter time.



**April 2017**

JHAH Nurse Care Line

JHAH has become one of the first hospitals in the kingdom to make specially trained, experienced nursing staff available for a call-in service offering healthcare advice.



This event marked the official opening of the Al-Hasa Health Center following its ambitious 26,000 m<sup>2</sup> revitalization. The center incorporates the latest in healthcare design, technology and equipment, which will offer the residents of al-Hasa outstanding, comprehensive, patient-centered services.



# JHAH Highlights



## JHAH Appoints New Chief of Staff

After an extensive search by both JHM and Saudi Aramco, JHAH selected Dr. Linda Lee, an internationally known expert in gastroenterology, hepatology and integrative medicine to lead clinical affairs as chief of staff. In this role at JHAH, she will oversee and support medical staff, expand clinical programs to continually meet the needs of patients and their families, enhance the quality and safety of health care services, and advance education and research efforts.

## Opening of Liwan Coffee Shop



JHAH is pleased to announce the opening of Café Liwan Coffee Shop at Dhahran Health Centre main lobby.

Café Liwan hours of operation are:

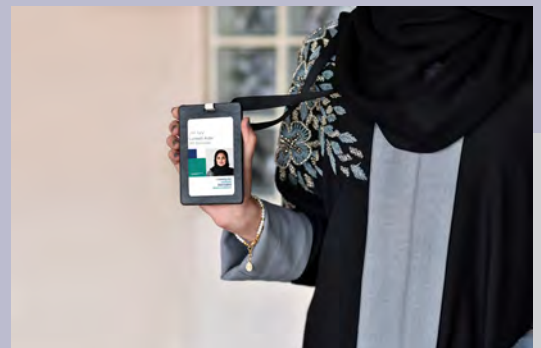
- 7 a.m. - 9 p.m. on weekdays
- 2 - 9 p.m. on weekends and holidays

## Government or company ID now required to collect medications from outpatient pharmacies

Effective October 1, all patients collecting medications from JHAH outpatient pharmacies are required to show a government or company ID card to obtain their medications.

Individuals collecting medications on behalf of someone else are also required to present appropriate ID.

This protocol is in the interests of patient safety, thank you for your cooperation.





# 2017 Summer Volunteer Activities Program Closing Ceremony

On August 23, 2017, JHAH recognized more than 30 JHAH summer student volunteers for their contribution to educational group activities across JHAH and Saudi Aramco.

Haitham Al-Ruwaili, COO (A) and senior director of Corporate Affairs welcomed the students, stating in his opening remarks that “A culture of volunteerism, enriches our communities, encourages the exchange of ideas and promotes compassion,” Mr. Ruwaili also shared that “At JHAH we are proud to have continued the legacy of volunteerism, which started many decades ago with Saudi Aramco Medical Services Organization. So while your time with us was short, I hope that you will leave here with long-lasting benefits; stronger leadership, as well as social skills; and greater self-awareness.”

Mr. Al-Ruwaili directed his appreciation to their mentors who helped lead the activities along with the program coordinator, Salah Al-Sultan, JHAH’s Visits and Logistics group leader.

Beginning their journey in July, the JHAH summer volunteers conducted health awareness campaigns in Saudi Aramco within Al-Midra and the Tower Buildings, and at JHAH’s Primary Care Clinic. Targeting Saudi Aramco and JHAH employees and their dependents, the volunteers’ outreach activities managed to raise awareness through health awareness booths representing four groups:

- Smoking Cessation Group “A Journey to Quit Smoking”
- Motor Vehicle Accident Awareness Group
- Colon Cancer Awareness Group “Fight for Your Colon”
- Obesity Management Group “Fighting Obesity”

Honoring their hard work during the program’s closing ceremony, Dr. Zeina Khouri-Steven, JHAH Chief Nursing Officer, and Mr. Al-Ruwaili congratulated each volunteer and JHAH staff committee members on their health awareness efforts throughout the program.

With their activities program coming to an end, volunteer and medical student Zainab AlTalal reflects on her time as a summer volunteer at JHAH sharing that “It’s about enjoying the experience and having a positive attitude”.

## Fighting obesity:

- Reem Al Sulaiman ( leader)
- Nouf Al Shareede
- Raghad Al johani
- Norah Al battah
- Abdullah Al-homidan
- Maan Al behair ( leader)
- Abdulrahman Al ghamdi
- Noor Shihab
- Ali Al Ibrahim



## Motor Vehicle Accident

- Rashid Al ghanim ( leader)
- Amal Al suliman
- Batool Al bahrani
- Sultan Al Sultan



## A journey to quit smoking

- Shahd AlKhunaizi ( leader)
- Zainab AlTalal
- Ahmed AlQatari
- Khalid AlHusain
- Albandri Almintakh
- Reem AlHawaj
- Lilian Bin Alshaikh
- Malak AlAtallah
- Renad al aqil
- Shooq al aqeal



## Fight for your colon:

- Mujtaba Aljumah (leader)
- Enaes Alobaid
- Malak AlQurain
- Maryam AlHussain
- Atheer Albasushal
- Kawther Al Abdrab AlRasol
- Fatimah Ibrahim



# *A First in the Kingdom of Saudi Arabia*

## *Graduation of the Inaugural Johns Hopkins Aramco Healthcare Doctorate of Nursing Practice Cohort*



Dhahran - August 16, the first and only Doctorate of Nursing Practice (DNP) in the kingdom has celebrated the graduation of the inaugural cohort of 13 Johns Hopkins Aramco Healthcare (JHAH) nurses. The cohort, who commenced their DNP journey two years ago, celebrated their graduation and attained their professional doctorate. Their graduation increases the number of practicing nurses in Saudi Arabia who hold doctorates by 30% in one day.

The DNP is a practice focused degree that prepares students to lead healthcare innovations and influence healthcare policy. This degree promotes leadership, implementation science and theoretical principles of nursing, analytical skills principles and evidence-based practice.

Addressing the graduates, Dr. Patricia Davidson, Dean of the Johns Hopkins University School of Nursing, and an administrator and professor in the program, declared, "Today you've become a "Hopkins" nurse and you are now part of a renowned history and community, based in excellence and compassion. We welcome you and we are so proud of you."

The DNP program was a foundational element of the joint venture agreement between JHAH's parent organizations - Saudi Aramco and Johns Hopkins Medicine International. The close academic ties between Johns Hopkins University School of Medicine (JHUSON) and JHAH enabled the design and execution of an integrated, flexible educational model.

Throughout the JHAH DNP, the 13 nurses continued with their professional duties, spending most of their time studying at JHAH medical facilities. They also traveled to the prestigious Johns Hopkins University School of Nursing (JHUSON) campus in Baltimore for two weeks of studies and clinical training each semester. The DNP is collaborative, culturally respectful, engaged, and tailored to the needs of JHAH and the students.

"We had the right students, individuals with the potential to not just complete our program but to thrive in it and to move the nursing profession forward in Saudi Arabia and elsewhere," stated Dr. Sharon Dudley Brown JHUSON professor.

The partnership between JHAH and JHUSON focuses on capacity development initiatives to promote nursing in the Kingdom of Saudi Arabia through discrete but linked activities such as:

- Acting as a thought leader for innovation and nursing leadership through collaboration with Saudi Commission for Health Specialties (SCFHS)
- Implementing and evaluating a clinical leadership component of the nurse intern program

During the graduation ceremony, faculty, family and friends filled the hotel ballroom to show their support for the 13 graduates as they accepted their parchments dressed in

# Doctorate of Nursing Practice Graduation Ceremony Summer 2017



traditional Johns Hopkins University School of Nursing gowns.

“The graduates excelled during the rigorous two-year program. They were challenged to grow and develop academically, professionally and personally. This program enhanced their clinical and leadership skills, and solidified their role as an essential component in delivering quality healthcare,” commented Dr. Zeina Khouri-Stevens, chief nursing officer, JHAH, and a leader and professor in the doctoral nursing program.

Ali Rabaan, father of DNP graduate Maisa Rabaan, spoke at the event. “There is no doubt that higher nursing education can make a difference in many ways, be it at the level of patient care, safety or leading the continuous improvement process. The knowledge and skills our daughters have acquired will surely have a positive impact on the quality of healthcare.”

“Leadership development is a fundamental need to ensure

the sustainability of our success and growth into the future,” said Daniele Rigamonti, M.D., Chief Executive Officer, JHAH.

“We have many reasons to be optimistic about the future of JHAH, and the success of this first remarkable cohort is certainly one of them” he added.

The program is also of national importance, JHAH has a productive relationship with the Saudi Commission for Health Specialties (SCFHS) and earlier this year the DNP was presented to the SCFHS. This collaboration continues to explore the wider potential of the program. Dr. Mustafa Bodrick, SCFHS consultant in Nursing Education, is an adjunct faculty in the JHUSON and was an honored guest at the graduation.

JHAH is working with Johns Hopkins University to expand opportunities for the DNP and will share more information on the program and the application process as it becomes available.

# Mindfulness and Wellbeing

By Reem Bubshait



- It's good for our body as it boosts our immune system and help fight illnesses as it lower the risks of heart attacks and strokes
- It minimizes chronic pain and help with cancer recovery
- It helps in weight reduction as mindful eating encourages healthy eating choices.

There are many ways to practice mindfulness but a key component is reminding yourself to notice your feelings, body sensations, thoughts and your surroundings.

Here are some mindful exercises that you can do during the day to empty your mind and connect with yourself:

1. **Mindful breathing:** this practice can be done standing or sitting down- focus on your breathing for one minute. Place you hand on your abdomen and take a deep breath, hold it for few seconds and then let go.
2. **Mindful observation:** choose an object from your surrounding environment, it can be a flower, the clouds in the sky or even an insect. Simply relax and don't do anything except noticing the thing you are looking at. This exercise allows you to connect with the beauty of the environment around you. This is missed when we are rushing into our daily work schedule.
3. **Mindful awareness:** this exercise helps you appreciate simple daily tasks and the results they achieve. Basically, be attentive to a simple daily ritual; like having your morning coffee; when you have it, stop for a moment, smell the coffee aroma and appreciate how fortunate you are to be able to have a drink either alone or with your family.
4. **Mindful immersion:** instead of struggling through finishing a certain task, become aware of the steps required and fully indulge yourself in the progress. Align yourself physically and mentally with the activity. You will find joy and satisfaction in your work instead of being trapped in daily routine.
5. **Mindful appreciation:** this exercise is aimed to give appreciation to things that seems insignificant in life. To do this exercise, use a pen and a paper, your notepad or even your phone and list five things in your life that usually go unappreciated. e.g., electricity that gives you power, roof over your head for shelter or food in the fridge...etc.

Have you ever searched your bag looking for your cellphone, then remembered that you have left it in the house? Or searched your pockets for the house keys to remember that you placed them in the car? Did you ever have a conversation with your child, but your mind was drifting toward future plans?

Nowadays, it is easy for everyone to rush through life without stopping to notice much. We tend to drift our minds into the next steps without paying attention to the present moment.

Professor Mark Williams, director of the Oxford Mindfulness Center, says:

"It's easy to stop noticing the world around us. It's also easy to lose touch with the way our bodies are feeling and to end up living 'in our heads' – caught up in our thoughts without stopping to notice how those thoughts are driving our emotions and behaviour".

Maintaining moment- by- moment awareness of our body, feelings, thoughts and surrounding environment is called Mindfulness.

Mindfulness enhances wellbeing by bringing psychological, physical and social benefits. Here are some benefits of mindfulness:

- Improves mental health as it reduces stress and fights depression
- It improves brain activity and make us tune out distractions and improves learning, memory and attention skills

# Your 2017 Annual Health Assessment

Johns Hopkins Aramco Healthcare (JHAH) cares about your health. We are happy to offer you the opportunity to take the annual health assessment survey, which you will receive through email. The survey will take about 15 minutes to complete, with a series of questions to answer about your diet, level of activity, and other factors that are key for good health.

After completing the survey, you will immediately receive a Personal Summary Report that includes your results, risk factors, and the actions you can take to improve your health and well-being. This report will help your physician identify areas where the two of you can work together to improve your health.

JHAH ensures data confidentiality; you will receive your unique ID and login details to take the survey from **[sh-batch@aramco.com](mailto:sh-batch@aramco.com)**

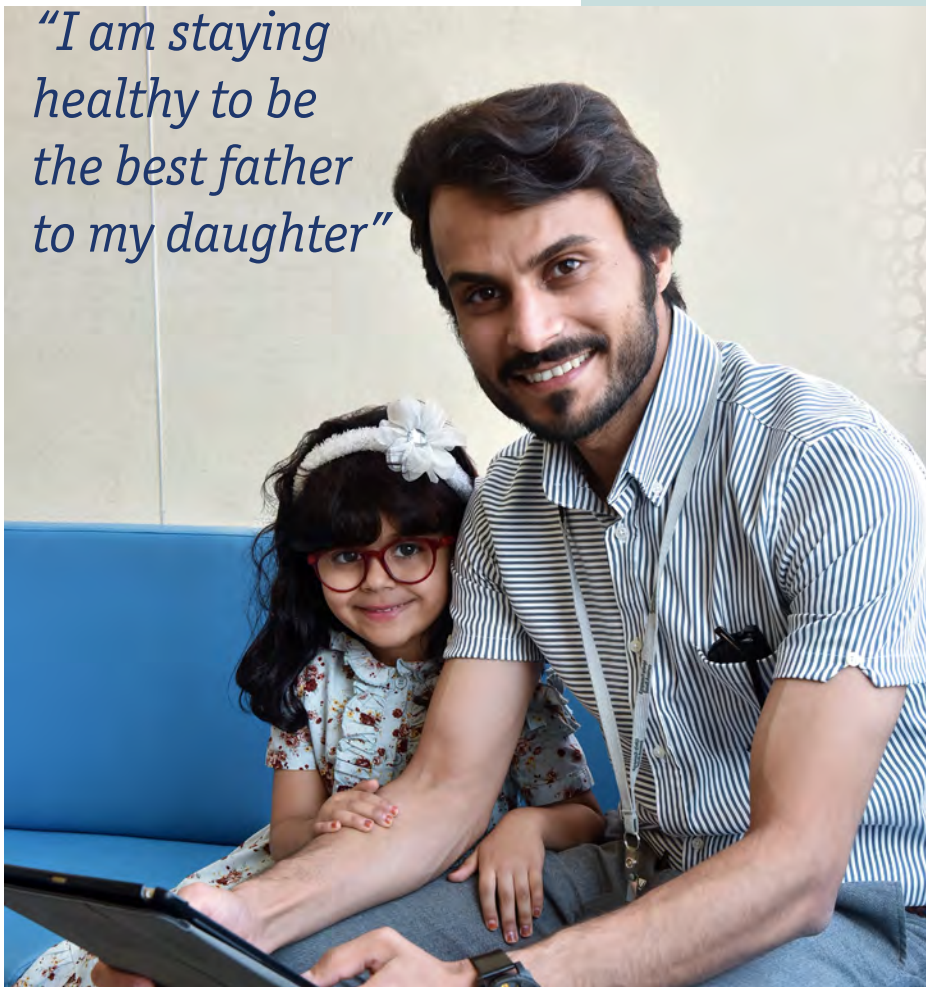
Take the survey and enjoy a healthier future.

If you have any questions about the survey, please email [HAHelp@jhah.com](mailto:HAHelp@jhah.com)

## Your Health, Our Commitment

*JHAH Population Health Department*

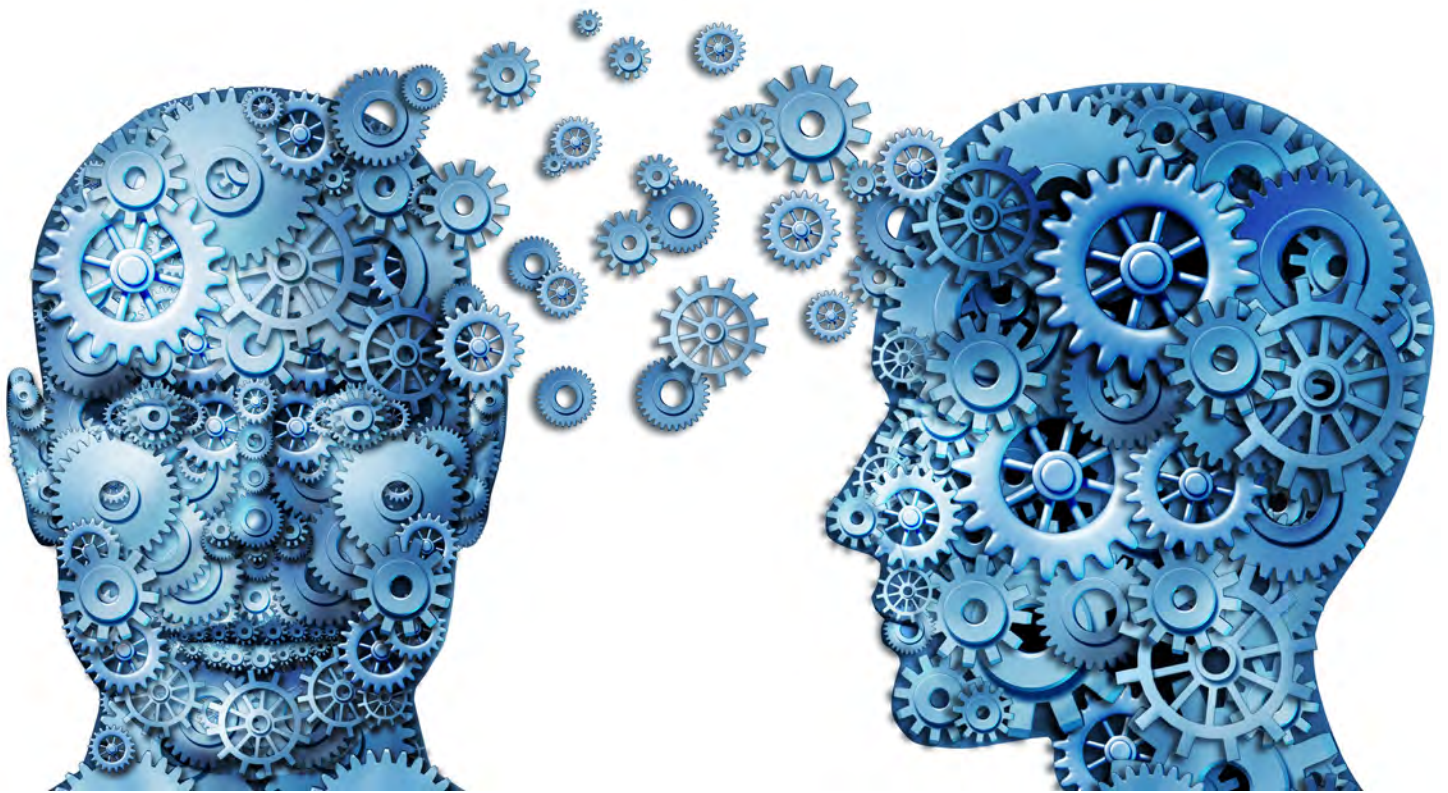
*"I am staying healthy to be the best father to my daughter"*



# *Distinguished Faculty Visitor Program*

## *Promotes Two-way Transfer of Knowledge Between JHM and JHAH*

*By Kristen Pinheiro*



Collaborating with culturally diverse medical experts. Experiencing a medical treatment facility in another country. Establishing long-lasting, collaborative relationships with colleagues in Saudi Arabia.

These are reasons orthopedic surgeon Dr. Jack Ingari chose to participate in Johns Hopkins Medicine's (JHM) Distinguished Faculty Visit program. Ingari is just one of the 27 accomplished leaders from Johns Hopkins' schools of Medicine, Nursing and Public Health who have traveled to Saudi Arabia since the start of this program in February 2015 to foster relationships with their physician colleagues at Johns Hopkins Aramco Healthcare (JHAH).

"My visit allowed me to understand more fully the role Johns Hopkins is playing in this joint venture, as well as to begin to develop relationships with physicians working at JHAH," says Dr. Paul Auwaerter, an infectious diseases specialist at JHM.

Dr. James Ficke, chair of orthopaedics at JHM, adds, "It gives us an opportunity to visit JHAH and get to know the faculty there. I think the program is great way to introduce who they are and who we are, so we can really understand each other and start establishing relationships."

While on the ground in the Kingdom, distinguished faculty members give Grand Rounds lectures for which attendees at JHAH can earn Category I continuing medical education credits from the American Medical Association. So far this year, participants have already earned more than 1,700 credits for attending Grand Rounds presentations with titles ranging from "Diabetes Management: What Is on the Horizon?" to "Hepatitis C: Transforming a Cure."

"Sharing knowledge is one of the objectives of the joint venture between Saudi Aramco and Johns Hopkins Medicine, and this is most visible to staff and the public through the Distinguished Faculty Visitor program," says Dr. Ramzi Banda, a JHAH neurologist who co-leads the program with Dr. Charles Wiener, vice president of academic affairs for Johns Hopkins Medicine International (JHI).

JHM faculty also join JHAH physicians in the clinic, on the ward and in the operating room to discuss diagnostic and therapeutic approaches. Expert physicians from both entities review difficult cases at JHAH and share the latest advances in their specialties to continually improve patient care and potentially save costs by avoiding outside referrals.

"These peer-to-peer interactions bring the best minds to bear as JHAH clinicians address our patients' complex medical issues and while we, as an organization, continue to evolve into the medical center of excellence in Saudi Arabia," says Dr. Daniele Rigamonti, JHAH's CEO.

In addition to collaborating with their JHAH counterparts, JHM's distinguished faculty also provide community outreach lectures to share practical medical information directly with Saudi Aramco employees and their families. These world-renowned physicians discuss topics such as weight loss, cancer prevention, and avoiding and treating diabetes and answer questions on important health issues.

"The Saudi Aramco community is interested and well-informed about their own health care, and they are exceptionally motivated to improve their health," says Dr. Mehboob Hussain, a JHM pediatrician.

And the knowledge transfer works both ways during these visits. Dr. Michael Streiff, a hematologist at JHM, says the program helped him hone his expertise as a clinician. "You become a good doctor by seeing many patients and by observing how other doctors do things. I was able to learn a lot from my JHAH colleagues," he says.



### *Distinguished Faculty Visit: Dr. Harpal Khanuja*

While Johns Hopkins orthopaedic surgeon Dr. Harpal Khanuja was recently at JHAH, he proctored three complex joint replacement surgeries and attended clinics side-by-side with his colleagues there. He also presented a Grand Rounds lecture for JHAH clinicians and a community outreach lecture on hip and knee arthritis, attended by more than 80 members of the Aramco and JHAH communities.



### *Upcoming Distinguished Faculty Visit: Mark Anderson, M.D., Ph.D.*

William Osler Professor of Medicine and Director of the Department of Medicine at the Johns Hopkins University School of Medicine and Physician-in-Chief of the Johns Hopkins Hospital

Grand Rounds Topic: Oxidant Stress in Health and Disease

Community Outreach Topic: The Epidemic of Atrial Fibrillation.

# Connect with JHAH



More than  
**6,203**  
followers

@JHAHNEWS



More than  
**1,785**  
likes

Johns Hopkins Aramco Healthcare



More than  
**1,614**  
followers

@JHAH\_NEWS



More than  
**47,721**  
followers

Johns Hopkins Aramco Healthcare  
(JHAH)



**249**  
subscribers  
**17,873**  
views

Johns Hopkins Aramco  
Healthcare (JHAH)

Do you need help  
with a health care  
service issue?

Email Patient Relations  
[PatientRelations@  
JHAH.com](mailto:PatientRelations@JHAH.com)

## The Nurse Care Line



JHAH has become one of the first hospitals in the kingdom to make specially trained, experienced nursing staff available for a call-in service to offer healthcare advice. The Nurse Care Line provides consultation and assistance to patients and their families, regarding healthcare information, home care and navigation of the JHAH healthcare system.

- The Nurse Care Line is staffed by Arabic and English speaking nurses
- Available 7:30 a.m. to 3:00 p.m. Sunday through Thursday
- Call 800-305-4444, and out-of-kingdom at +966-13-877-3888 and follow the prompts.

## How to Contact Johns Hopkins Aramco Healthcare

If you are a registered patient trying to make medical or dental appointments and to access multiple medical services, please contact the Centralized Contact Center (CCC) by calling:

- 800-305-444 (in kingdom)
- +966-13-877-3888 (out of Kingdom)

This automated service is available 24 hours a day 7 days a week. If you prefer to speak to an agent, please call the CCC during working hours (7 a.m. - 4 p.m.), Sunday-Thursday.

For more information, please visit the "Contact Us" page on our website <http://www.JHAH.com>



# JHAH Bulletin Board

## Emergency Numbers: Save These Numbers To Your Mobile Phone

- **Dhahran and all areas:** From a landline 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 Contact 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@JHAH.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.
- **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>.
- **Community Counseling Clinic:** Call +966-13 877- 8400, +966-13 877-3256, +966-13 877-8306
- **Patient Relations:** PatientRelations@JHAH.com
- Patient Relations is available to help with issues that you are unable to resolve with specific clinical areas.
- **Al-Midra Wellness Center** offers consultations, lifestyle wellness coaching and health screenings (Mon to Wed 1-3:30 p.m.) Pharmacy (Sun to Thurs 12-4 p.m.)

# *Five Reasons Why JHAH's OR Patient & Family Spaces have Enhanced Care for Patients and Families*

Patients and their families are now accommodated in a friendly, comfortable setting while waiting for the best medical care JHAH can provide.

Johns Hopkins Aramco Healthcare is proud to announce the opening of the newly renovated Operating Room (OR) main entrance with a modern reception, and expanded waiting area and patient status update screen.

1. Our expanded reception and waiting areas are designed to create a welcoming and comfortable environment.
2. Two new Patient Relations Offices to offer help, support and assistance. The offices are located in the Day Surgery Unit and the Out Patient Procedural Area.
3. If you have brought young children, you can watch them from your seat as they play in the glass enclosed children's play area.
4. Three waiting areas (men, family and a more private area for women).
5. Hungry?, try a healthy snack from the vending machine.

We strive to provide you and your family with a healing environment benefits your physical and psychological wellbeing.

