

Clinical Services Plan: Case Study 14

# Healthcare Marketing

## Multi-channel engagement to turbocharge healthcare transformation

JHAH's five-year Clinical Services Plan

Transformation Program Specialist Support

Champion

Ramez Youssef



نحن نهتم  
We Care

February 2025



مرکز جونز هوبكنز  
أرامكو الطبي  
Johns Hopkins  
Aramco Healthcare



## Case Study 14: Healthcare Marketing

# Multi-channel engagement to turbocharge healthcare transformation

### Project details



#### The objective

- The Clinical Services Plan (CSP) is an ambitious five-year clinical services transformation program with five overarching clinical goals and 16 objectives that will ensure every patient receives the highest quality healthcare.
- The objective of specialist marketing and communications support is to ensure the key messages about the transformation are communicated in a timely and engaging manner to multiple audiences, in order to raise awareness of the changes and the benefits they are delivering.

#### The six audiences

- Patients and families
- JHAH employees and other healthcare professionals
- Hospital leaders and administrators
- Policymakers and regulators
- Researchers and academics
- Public and community members

#### The timeline

- Project kick-off: January 2023

#### The project team

##### Sponsor:

- Dr. JJ de Gorter, Chief of Staff

##### Champion:

- Ramez Youssef, Director, Marketing and Communications
- (previously) Marijke Richards, Interim Director, Marketing and Communications

##### Team members:

- Dalia Basrawi, Lead, Branding & Reputation Management
- Maha Makled, Marketing & Communications Subject Matter Expert
- Isam Sarakbi, Lead, Digital Communications

**For more information:** [ramez.youssef@jhah.com](mailto:ramez.youssef@jhah.com)

### About the Clinical Services Plan



Johns Hopkins Aramco Healthcare (JHAH) serves more than 140,000 Aramco employees, their relatives and retirees with a comprehensive range of inpatient and outpatient services. JHAH has carried forward the legacy set by Saudi Aramco of healthcare for all, putting caring for its community at the heart of everything it does.

In 2023, JHAH launched its five-year Clinical Services Plan (CSP). The CSP was developed in response to changing patient expectations and the realization that JHAH must evolve if it is to survive and thrive. The Plan's vision is that JHAH will become the Kingdom's first choice for outstanding integrated healthcare.

The CSP contains 16 strategic objectives to deliver against five goals (service excellence, access, people, sustainability and reliability), and is supported by four delivery principles (accountability, pace, pragmatism and outcomes).

### Embedding communication excellence within the CSP



In recent years, there has been increasing recognition of the importance of effective communication in driving healthcare excellence and transformation.

In late 2024, the HIPPA Journal published a wide-ranging article by its editor in chief, Steve Alder, in which he explored the "serious consequences" of poor communication in the sector <sup>1</sup>. He identified a number of factors that can lead to communication problems, including "ineffective policies and procedures, language difficulties, poor communication skills, workload pressure, poor documentation, conflicts between staff members, and ineffective communication systems in hospitals", and cited a CRICO report that estimated communication failures lie behind \$1.7bn of avoidable costs over a five-year period in the US healthcare sector alone <sup>2</sup>. Addressing these shortcomings, Alder argued,

will deliver benefits across the healthcare ecosystem, including:

- Improve quality of care and patient outcomes
- Enhance the patient experience
- Improve patient satisfaction scores
- Reduce the cost of healthcare
- Reduce stress for clinicians and prevent burnout.

It is understandable that communication principles are not always front-of-mind, and do not always come naturally to the overworked and harried physicians who are often dealing with life-and-death situations. The caricature of the family doctor’s illegible and indecipherable scrawl on a medical prescription (before the welcome advent of electronic alternatives) was based on the day-to-day reality of patients worldwide. For this reason, when Dr J.J. de Gorter, JHAH Chief of Staff, launched the ambitious clinical transformation program, he was determined that a focus on communication should be embedded at its core. “At every opportunity, we wanted to remind project champions of the need to consider who they should be communicating with, as well as what, why and how.”

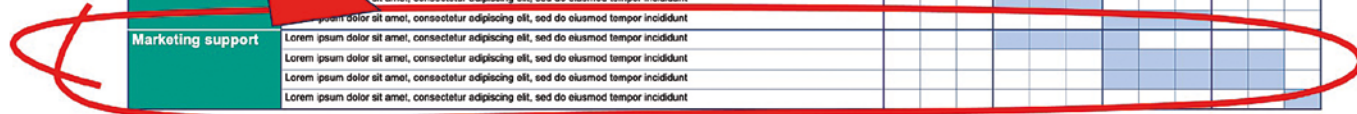
To embed communications within the program, a number of steps were taken:

- **Marketing experts represented within the project governance.** CSP case study 11 (‘Program management’) provided an overview of the governance arrangements which were created to steer and direct the transformation. The JHAH Marketing and Communications Director was invited to sit on the high-level Steering Committee, chaired by the Chief Executive Office Dr Michael Walsh. In addition, marketing experts sat on the Transformation Board, which had a more granular role in resolving issues and obstacles at its intensive monthly sessions.
- **Marketing representatives in all relevant project teams.** Before any CSP project was approved to proceed, the project champion was asked to complete and present a Project Initiation Document for consideration by the Transformation Board. This document included details of the proposed project team. A key topic during its consideration was whether sufficient communication expertise and resource has been included. As the program gathered momentum, it became apparent to Marketing Director Ramez Youssef that this support could not be provided ad hoc by his existing marketing personnel, and that full-time support to the CSP was required. For this reason, marketing and communications expert Maha Makled – who had a wealth of experience from within and outside the healthcare sector – was assigned as the key contact point to challenge and drive the CSP’s communications activities.

Figure One: CSP projects Strategy On A Page (SOAP) - template for 2025

<b>Objective</b>	<b>Number</b> ABCXYZ	<b>Title</b> Lorem ipsum dolor sit amet	<b>Champion</b> First name Surname					
<b>Purpose</b>	<b>Project Vision (recap)</b> Lorem ipsum dolor sit amet, consectetur adipiscing elit, sed do eiusmod tempor incididunt ut labore et dolore magna aliqua. Ut enim ad minim veniam, quis nostrud exercitation ullamco laboris nisi ut aliquip ex ea commodo consequat.		<b>Key learnings from 2024</b> Lorem ipsum dolor sit amet, consectetur adipiscing elit, sed do eiusmod tempor incididunt ut labore et dolore magna aliqua. Ut enim ad minim veniam, quis nostrud exercitation ullamco laboris nisi ut aliquip ex ea commodo consequat.		<b>PESTL factors in 2025</b> Lorem ipsum dolor sit amet, consectetur adipiscing elit, sed do eiusmod tempor incididunt ut labore et dolore magna aliqua. Ut enim ad minim veniam, quis nostrud exercitation ullamco laboris nisi ut aliquip ex ea commodo consequat.			
<b>Key performance indicators</b>	<b>KPI (max 3)</b>	<b>Unit of measurement</b>	<b>2024E Full year</b>	<b>2025 Full year</b>	<b>2025 Q1</b>	<b>2025 Q2</b>	<b>2025 Q3</b>	<b>2025 Q4</b>
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<b>Activity plan and milestones</b>	<b>Priorities</b>	<b>Actions</b>		<b>Q1</b>	<b>Q2</b>	<b>Q3</b>	<b>Q4</b>	
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Marketing section in every SOAP





- Communications 101.** On 29 January 2023, shortly after the formal launch of the CSP, all the project champions were invited to participate in a two-hour workshop, in which their vital roles in leading the change program were explained. One of the highlights of this workshop was a presentation by Marijke Richards (JHAH's interim marketing director at the time), in which the principles of communication excellence were set out. Ms Richards provided examples of 'the good, bad and ugly' communications from healthcare providers in a variety of settings, and surveyed the wide variety of tools available for disseminating messages. She concluded with one of her favorite quotations: "Five minutes of communication can save a year's worth of turmoil and misunderstanding."
- A communications placeholder in every Strategy On A Page.** At the outset of a new calendar year, each champion is responsible for compiling a Strategy On A Page (SOAP) which sets out their goals, key performance indicators (KPIs), activities and milestones for the next 12 months. In each SOAP, a section is set aside to document the key communication deliverables – to be completed as a collaborative exercise by the champion and Maha Makled. This approach means that the topic

of communications cannot be inadvertently overlooked; each project team must address it head-on (see Figure One).

## A broad audience requires a multichannel approach



One of the earliest tasks when devising a communications campaign is to identify the nature of the audience. For many healthcare professionals, the obvious answer is: the patient. And, of course, no healthcare operations would survive for long without a regular flow of people seeking outpatient or inpatient treatment. However, the CSP champions were encouraged to think more broadly about the potential audiences, and in particular about six discrete groups. These included:

- Patients and families.** Patients (current or potential) have an obvious interest in remaining aware of the improvements being made to enhance the range of services available at JHAH and how they can be accessed; in addition, family members and carers are often essential stakeholders in a holistic healthcare outcome.

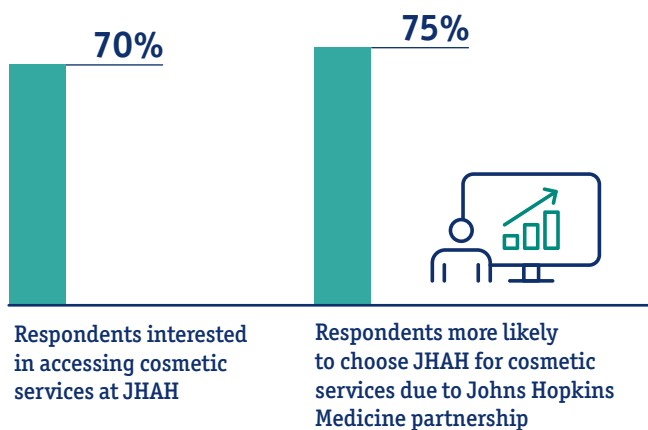
Figure Two: JHAH marketing mix

Channels (NB: illustrative not definitive)	Primary audience(s)		
	Internal	Patients	Other
Aramco blast		●	
Banners		●	
Blogs		●	●
Booklets		●	
Booths		●	●
Case studies	●	●	●
Digital screens	●	●	
Intranet	●		
Leaflets		●	
Lectures and presentations	●	●	●
Letters / emails	●	●	
Merchandise	●	●	
MyChart		●	
Public relations		●	●
Research articles and reports		●	●
SMS		●	
Social media	●	●	●
Stickers		●	
Tent cards		●	
Town Hall meetings	●		
Videos	●	●	●
Website		●	●





Figure Three: Example of research-led market insight



- **JHAH employees and other healthcare professionals.** The immediate need of JHAH staff was to understand how any changes would affect them and their team; as a leader in healthcare innovation in the region, JHAH also wished to share its experience of how new approaches and practical solutions can be applied in clinical settings.
- **Hospital leaders and administrators.** As an extension of its leadership role, JHAH had a parallel commitment to help anyone in a healthcare leadership role to learn about successful strategies and projects that can inspire positive change.
- **Policymakers and regulators.** This audience has multiple interests, including a desire to understand the latest advancements and evidence-based practices in healthcare in order to inform policy decisions.
- **Researchers and academics.** For this audience, JHAH was committed to provide support in the analysis and exploration of real-world applications and outcomes, so as to contribute to continuing professional development and the deepening of knowledge.
- **Public and community members.** Finally, JHAH is conscious that healthcare matters to everyone in society regardless of demographic, and is enthusiastic to help interested individuals to be better informed about the latest trends and initiatives that could be relevant to them, their families or their communication.

Often, Mr Youssef and Ms Makled began their discussions with project teams by facilitating a mini-workshop in which they would open their thinking about the range of communication tools available. Without such an exercise, the simple response would often be “put a paragraph onto the website”. While this can often play a part in the solution, it is rarely sufficient since it relies on the audience actively connecting with the provider in a place of the provider’s convenience. Figure Two highlights

some of the other options to be considered as part of a multichannel approach.

Ramez remarked: “Healthcare communication is unlike traditional consumer engagement. People don’t browse casually; they seek answers in moments of urgency, concern, or need. It’s not about selling—it’s about trust, reassurance and guiding critical decisions. Often, their perception of a healthcare provider is shaped by their last experience, which may be years old. The challenge is bridging that gap — ensuring people have timely, relevant, and trusted information when it matters most.”

## Understanding the customer’s expectations



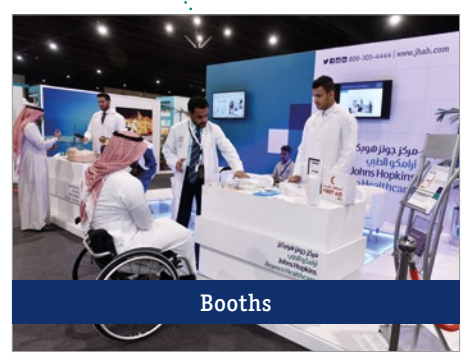
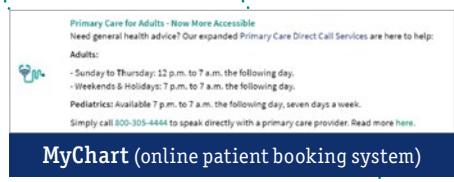
An important foundation stone of CSP communication was that it should be driven by data, rather than created in a vacuum. For this reason, significant weight was placed upon patient insight.

Many of the transformation priorities were determined by monitoring patient satisfaction results, with the project teams working closely with colleagues from Patient Relations and Research. This was often supported by in-depth patient interviews and focus groups; for example, in May 2023 about 70 patients attending appointments in the ObGyn clinic were interviewed by an independent multilingual researcher who enquired about their entire journey from ‘need’ to ‘meeting the physician’. The findings were grouped under four headings: access pinch points (bookings, on the day, referrals, follow-up); communication by physicians and nurses (information and empathy); other resources (including patient literature); unit performance (scheduling, delays, and on-call cover).

Equally important was the role of research when new services were being considered. In late 2023, JHAH wished to understand the potential appetite for cosmetic treatments (for example, plastic surgery or aesthetic / dermatological services). The Marketing team arranged for an extensive online survey, which was completed by more than 900 respondents during a four-week period. This highlighted high latent demand from both Arabic and English-speaking audiences, with the most popular treatments including injectables (such as Botox, fillers), laser treatments and body contouring. Crucially, JHAH was regarded as a credible service provider, as seen in the headline data shown in Figure Three.



Figure Four: Examples of multichannel engagement



## Announcing a major service change



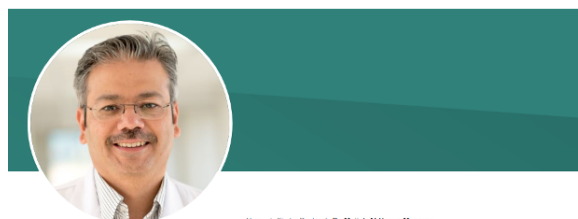
The CSP is primarily concerned with transformational change, ensuring JHAH services are modernized in line with best global practice, embrace innovation and new technologies, and are patient-centered at each stage. Examples of such changes during the first two years of the program include:

- Extended opening hours (to 9pm) in primary care and specialty clinics (see Case Study 05)
- The launch of a 24/7 teleconsultation service, accessible by phone and video (see Case Study 15)
- The launch of a Hospital At Home service so that patients can recover from their operations in the comfort of their own home, while benefitting from remote automated monitoring technology and regular physician visits (see Case Study 12)
- The opening of an Urgent Care Unit to enhance a fully joined-up approach to patients with same-day care needs (appropriate response tailored to the severity of their condition) (see Case Study 09)
- The embrace of new technologies in specialist services such as the Cath Lab, Endoscopy and Radiology (see Case Studies 03 and 08).

In such situations, it is not practical to rely on a single tactical message to reach all potential service users, and the need for multichannel communication rises exponentially. For this reason, the project teams embraced both traditional and new media to stimulate the greatest possible awareness among the intended audiences. These have included:

- JHAH website homepage – Used to announce the switch to appointment-only primary care alongside the opening of the Urgent Care Unit for walk-in needs.
- Patient information leaflets – Provided critical information to patients entering the Hospital at Home service and served as a guide for selecting the appropriate care.
- MyChart (online patient booking system) – Raised awareness of extended opening hours for scheduled appointments.
- Videos – Used as an engaging medium to help Hospital at Home patients understand the experience before providing consent.
- Digital touchpoints – Leveraged to ensure timely communication of service updates, reaching both staff and patients across JHAH.

## Figure Five: MSK physician bio



Home / Find a Doctor / Dr. Mojib Al Haque Manzary

### Dr. Mojib Manzary

Professional Title: Orthopedic Surgeon and Chief of Orthopedics  
Specialty: Orthopedic Surgery  
Location: Dhahran  
Gender: Male  
Languages: Arabic, English

Dr. Mojib Manzary is the Chief of Orthopedics and a Consultant Orthopedic Surgeon with more than 28 years of clinical experience. He is also an Adjunct Assistant Professor of Orthopedic Surgery at Johns Hopkins Medicine.

#### Areas of Expertise

- Adult lower extremity joint reconstructive surgeries, including primary, complex, and revision hip and knee replacements
- Dr. Manzary is a Fellow of the Royal College of Physicians and Surgeons of Canada. He earned his medical degree with honors from King Saud University College of Medicine. He completed his orthopedic residency at the University of Toronto, Canada, followed by advanced fellowship training in hip and knee reconstruction at the University of British Columbia, Vancouver, Canada.
- Dr. Manzary is a past chair of the Arthroplasty Chapter of the Saudi Orthopedic Association and currently serves as the Chair of the Knee Subspecialty Committee of the Société Internationale de Chirurgie Orthopédique et de Traumatologie (SIChOT, International Society of Orthopaedic Surgery and Traumatology).
- He is also an active member of several prominent orthopedic societies, including the International Congress on Joint Reconstruction (ICJR), the Asia Pacific Hip Society (APHS), and the Asia Pacific Arthroplasty Society (APAS).

- Patient advisers – Positioned alongside service users to guide them through primary care changes, including how to use MyChart for convenient access to services.
- Social media campaigns – Included geotargeted posts aimed at Saudi Aramco employee communities, ensuring precise audience reach and relevance.
- Case studies – Eleven completed projects were documented in detailed case studies (2,000-5,000 words), publicly available for download on the JHAH website and widely shared by C-suite members on LinkedIn.
- Internal and external communication channels – Internal channels included staff announcements and the bi-weekly staff e-newsletter, while external communication was driven through Aramco staff email blasts and the Wellbeing monthly e-newsletter, ensuring effective engagement across employees, patients and the broader community.
- On-ground activations – Rolled out to raise awareness of various initiatives, including Telehealth, by highlighting key benefits, addressing healthcare concerns and improving accessibility. These activations also provided opportunities to engage with visitors, answer enquiries and assist with digital tools like MyChart.
- SMS notifications – Used to deliver personalized, timely updates relevant to patient care at JHAH, tailored to specific demographics.
- IVR (Interactive Voice Response) – Implemented to raise awareness of expanded direct-call services, ensuring patients received key updates at the most relevant moment—immediately after selecting the ‘Direct Call with a Primary Care Physician’ option,
- Email blasts – Provided high-level information to relevant parties, including links to landing pages with further details.



## Lessons learned



During the period since the first Champions workshop in January 2023, the experiences of different communications approaches within the CSP have revealed a number of important lessons:

### At its core, healthcare is about the physicians

Of course, patients respond positively to a pleasant hospital environment. However, at its core, their priority is reassurance that the physician who is attending to their needs has the required competency and expertise. Historically, JHAH has not always paid sufficient attention to this issue, and many of the physician bios available on its website were out of date, too sketchy, or omitted key information. Soon after her arrival, Ms Makled joined the project team which was responsible for enhancing the MSK (Musculo skeletal) and physical therapy services. Already, the project deliverables included new quality measures, for example around knee and shoulder protocols, the implementation of Patient Reported Outcome Measures (PROMS), and the hosting of a three-day MSK conference attended by more than 400 specialists from throughout the region.

Ms Makled added an additional task, which was a sweeping overhaul of the physician bios, ensuring a more complete range of information – including all relevant qualifications, research studies and areas of specialist professional interest. An example of a new, enhanced physician bio is included as Figure Five.

### Patients respond best to other patients

In any marketing communications, it is helpful to include statistical evidence of issues such as volumes, outcomes and waiting times. But healthcare is ultimately about the health and wellbeing of actual people, and patients respond most positively to stories about other human beings. For this reason, an increasing focus of the communication effort is dedicated to collating and publishing patient experiences, subject of course to the consent of the individuals concerned.

A recent example of this related to Super October, when the JHAH Operating Room was challenged to complete in excess of 1,000 procedures in a calendar month for the first time in its history. Not only was this milestone achieved and surpassed (the final total was 1,252), but the patient who underwent the landmark 1,000th procedure was pleased to share her experience publicly. As reported in Case Study 13: 'The exact moment that the 1,000 target

was reached will not soon be forgotten: it was 10:07 on Saturday 26 October, when Noor Mohammed Alfaddagh, a 26-year old clinical dietitian, was admitted for complex odontectomy for an impacted molar. Ms Alfaddagh commented: "I was honored to be the 1,000th patient during this special month. The Operating Room staff were very supportive in how they cared for me throughout the experience. A lot of time was spent explaining the procedure to me, so I knew exactly what to expect. Then, when the day arrived, they did everything possible to help me relax and approach it with a positive frame of mind. I will always remember the huge colorful Super October signs as I was being taken into the theatre."

### External communications supported by Champion engagement

The greatest advocates of any change program should generally be the project Champions who are leading it. Every four to six months, a half-day offsite is held involving all the CSP Champions at which they share experiences, achievements and lessons learned. Marketing is invariably a leading item on the agenda. Often, the opportunity is used to consider innovative communications opportunities – including, at the most recent offsite, a visual depiction of JHAH's future state (once the CSP changes have been implemented) enabled by renowned cartoonist Kev Sutherland.

### Collaboration

In today's digital era, effective communication is no longer the sole responsibility of marketing teams. Success in healthcare requires that all staff – clinical and non-clinical – develop fluency in digital communication platforms. Every team member should be an advocate, a communicator and a trusted voice, ensuring that JHAH's expertise, services and patient-centered approach are consistently amplified and understood.

## Looking ahead



There are still three years remaining until the conclusion of the Clinical Services Plan (2023-2027). As Mr Youssef and Ms Makled consider the challenges ahead, they are determined that the Marketing and Communications involvement will continue to push boundaries, exploring new and innovative ways in which patients and others can be informed and engaged.

Mr Youssef said: "Effective healthcare transformation is only as strong as the communication that drives it.



Patients need clarity, staff need alignment, and trust is built through transparency, storytelling and innovation. By integrating strategic, multi-channel communication, engaging leadership, and ensuring both internal and external audiences are informed, we make transformation tangible, accessible and impactful.”

Ms Makled added: “There is significant potential to further enhance JHAH’s reputation by showcasing its physicians’ expertise, highlighting their qualifications to build trust, and educating patients on proactive health. This can be achieved through clear, engaging communication, supported by an integrated marketing strategy. Additionally, aligning internal and external communications ensures physicians and staff remain engaged in delivering the highest level of patient care.”

Readers are invited to return regularly to the Clinical Services Plan section of the JHAH website ([www.https://www.jhah.com/en/clinical-services-plan](https://www.jhah.com/en/clinical-services-plan)) for information about how these ambitions are realized throughout the remainder of the program.

#### Sources

1. Steve Alder, HIPAA editor-in-chief, Effects of Poor Communication in Healthcare, 22 November 2024, <https://www.hipaajournal.com/effects-of-poor-communication-in-healthcare/>
2. <https://www.rmfi.harvard.edu/News-and-Blog/In-the-News-Home/In-the-News/2016/February/Communication-failures-linked-to-1744-deaths-in-five-years>



## About the champion



### **Ramez Youssef**

Ramez Youssef is Director of Marketing and Communications at Johns Hopkins Aramco Healthcare (JHAH), where his responsibilities include brand management and engagement with multiple audiences, including the public, through impactful communications.

He holds a Bachelor of Commerce (Marketing and International Business) from the University of Auckland and is completing the CMO Leadership Program at Kellogg's Northwestern University.

Prior to joining JHAH, he held leadership roles at Abu Dhabi Stem Cells Center (ADSCC), Burjeel Medical City, and Sheikh Shakhbout Medical City, driving brand growth and patient engagement. His 13 years in telecoms include nine years at Nokia and four years at Qualcomm, where he led regional marketing, brand activations and product launches.

Also available



**Case Study #01: Horizon Scan**  
Scanning the horizon for healthcare innovations



**Case Study #02: The Back Referral Program**  
Enhancing access to JHAH for non-registered Saudi Aramco EMRs



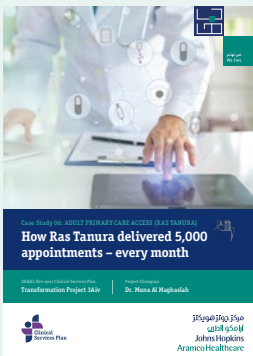
**Case Study #03: Endoscopy**  
Endoscopy waiting times cut from months to weeks



**Case Study #04: Operating Rooms**  
Faster access to surgery



**Case Study #05: Adult Primary Care Access (Dhahran)**  
The doctor will see you now



**Case Study #06: Adult Primary Care Access (Ras Tanura)**  
How Ras Tanura delivered 5,000 appointments – every month



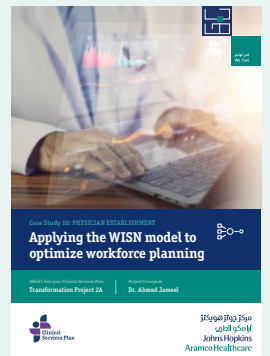
**Case Study #07: Referrals**  
Twenty-six referral pathways under the microscope



**Case Study #08: CATH Lab**  
Tackling the bed crunch



**Case Study #09: Urgent Care**  
A joined-up approach to same-day care needs



**Case Study #10: Physician Establishment**  
Applying the WISN model to optimize workforce planning



**Case Study #11: Program Management**  
Delivering a five-year clinical transformation program



**Case Study #12: Hospital at Home**  
Recovery in the comfort of the patient's home



**Case Study #13: Super October**  
Meeting the challenge of 1,000 procedures in one month

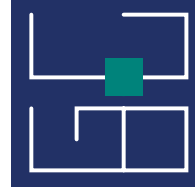


**Case Study #15: Telehealth**  
How virtual technologies enable 24/7 healthcare access

**Note: Additional CSP case studies are constantly under development. Please email or call your JHAH contact for information on future editions.**

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This case study is one in a series that showcases stories from implementation of the JHAH Clinical Services Plan (CSP). The JHAH Board approved the CSP in June 2022. It is an ambitious multiyear program to enhance and modernize a wide range of clinical activities. For more information about the CSP or any projects included in the program, contact the CSP Program Management Office: pmo@jhah.com.



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