8 New Services at JHAH

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GERGA'AN GIGGLE AND GIFTS WELLBEING | JUL 2017

Gerga'an Gifts and Giggles

"It lightened my heart to see my daughter Jood having so much fun," said Zainab AlSaffar. "I really appreciate everything the pediatric team does for the children." May 8, Pediatric Wards 6a and 6B held their annual mid-Ramadan Gerga'an event providing the young patients with a fun filled moment. "We do this not only to give the kids a break from their routine," said Remie Bushnak, Charge Nurse 6A. "Laughter and fun are therapeutic not only for the kids, but for their parents as well as the staff."







Johns Hopkins Aramco Healthcare Ramadan Celebration in Wed Institution

Johns Hopkins Aramco Healthcare (JHAH) in coordination with Wed Institution in Khobar celebrated Georgian On Sunday, June 11, 2017. More than 250 persons attended the event.

"It made me happy to see children having so much fun and enjoying their time. Thank you for giving me this opportunity to participate in this event," said Bahijah Al-Rashid, JHAH Public Relations Professional.



8 New Services at JHAH

More Services are Coming Soon

JHAH Nurse Care Line JHAH is one of the first hospitals in the Kingdom to have specially trained nurses available by phone to provide consultation and assistance to patients and their families regarding health information and home care.



Cardiac Surgery Program JHAH launched a Cardiac Surgery Program in April 2017 with a full schedule of minimally invasive procedures. Headed by Dr. Harry Parissis, JHAH cardiac and thoracic surgeon, the program is supported by Johns Hopkins Medicine through the Partners in Excellence Program.



Cornea Transplant Surgery The first suture-less scleral fixated intraocular lens (SFIOL) implant at JHAH was performed by Dr. Ashbala Khattak, JHAH consulting ophthalmologist and Dr. Alaa Hatoum, Consultant Ophthalmic Surgeon. The benefits of SFIOL are better vision, long term stability and reduced recovery time.



Palliative Care

JHAH has an active palliative care program designed to prevent and ease suffering and improve quality of life for patients with serious medical conditions. The palliative care team provides support for patients and families and improves communication between them and healthcare providers.



Cancercare Bone Marrow Transplant Surgeries In collaboration with King Fahad Specialist
Hospital Dammam, in March 2017, JHAH became
the second Eastern Province hospital where
bone marrow transplants are performed. This is
an important, lifesaving treatment for patients
suffering from multiple myeloma, lymphoma
and other types of cancers.



Obesity Management Program The new JHAH obesity management program is a multifaceted, comprehensive, multidisciplinary approach to addressing obesity that benefits from the Partnership Contribution Agreement with Johns Hopkins Medicine by tapping into the expertise of surgeons from the Johns Hopkins Center for Bariatric Surgery.



Enhanced Endovascular Surgery Program JHAH introduced an enhanced surgery program that provides patients with more types of endovascular interventions. The program, that includes a clinical rotation schedule, allows for more complex surgeries and began with a successful minimally invasive surgery called an endovascular aortic repair.



Sarcopenia Clinic In July 2017, the JHAH geriatric team, headed by Dr. Essam Jalal, in collaboration with Clinical Nutrition and Food Services, opened the Sarcopenia Clinic that focuses on diagnosing sarcopenia, a condition that adversely affects people over the age of 50.



Nurse-led Medical Care

Faster Care, Faster Relief



You, your child 18 years or older, or another loved one is coming down with a cold or flu or has a sore throat, ear ache or stuffed nose. You decide to come to Primary Care Building 50 where you expect to see a nurse and then wait for the doctor only to be told antibiotics won't help and you need to rest, drink plenty of fluids and rest.

For those patients who are suffering solely from an upper respiratory tract infection and decide to seek medical care, your time in Primary Care has been shortened to a single screening session with a nurse who has received additional training to diagnose and provide instructions on what you need to do to get better.

Welcome to the new JHAH Primary Care Nurse-led Service.

This model of nurse-led care has proven successful in the U.S. and Europe in quickly relieving patient concerns; minimizing antibiotic use, which with viral infections such colds, flu, and could actually be harmful; and allowing patients to receive faster care.

For more information about primary care services in Dhahran or other districts visit:

<u>http://JHAH.com</u> > Patient Care > Clinics & Services > Primary Care > Select the area relevent to you

Frequently Asked Questions

Who can benefit?

Anyone who is 18 years or older and is an eligible medical recipient at JHAH.

Where do I get this service?

Dhahran Primary Care Building 50, register at the main reception where you will be directed as appropriate to the Nurse-led Clinic

Do I need an appointment?

No, this is a drop in service

When it is available?

7:10 a.m. to 3:30 p.m. Sunday-Thursday

CARING PROFILE WELLBEING | JUL 2017

JHAH Hybrid Cardiac Surgery

For the first time in the Eastern Province, / a hybrid cardiac surgery was recently performed by a multidisciplinary surgical team./

The procedure included bypass surgery performed by Dr. Harry Parissis,/who heads the new JHAH advanced cardiac program,/ and a coronary stent implantation conducted by Dr. Ali Shehri, consulting surgeon.

Due to the experience of the team and partnership with Johns Hopkins Medicine,/ the JHAH program began by performing complex cases/including minimal access valve surgeries.

Since its opening in April 2017,/ the JHAH Cardiac Surgical Program team has conducted 40 advanced cardiac surgeries



Caring Profile



Dr. Harry Parissis

JHAH cardiac and thoracic surgeon and JHAH Cardiac Surgery Program head.

Education

- 2011 Fellow of the European Thoracic and Cardiac Society, EACTS
- 2004 FRCS (CT-h), British Board Exam, Royal College of Surgeons, UK
- 1996 PhD, FRCS (Glasgow) Nottingham City Hospital, UK
- 1991 Bachelor of Medicine and Bachelor of Surgery, University of Patras Medical School, Greece

Professional Background

- Cardiothoracic Surgeon, Johns Hopkins Aramco Healthcare, Present 2017
- Attending Cardiothoracic Surgeon, Royal Victoria Hospital, Belfast, UK, 2017 2009
- Off-Pump Fellowship, Essex University Hospital, London, 2008
- Attending Cardiothoracic Surgeon, St James Hospital, Dublin, 2007 –
 2006
- Cardiothoracic Surgery, Mater & St James Hospital, Dublin, 2005 1999

Quote

"Cardiac surgery has been proven to extend life expectancy over other forms of treatment. That is the reason that we do it. Thanks to our partnership with Johns Hopkins Medicine, we were confident we could tackle some challenging cases from the start. We are equally confident and are highly focused on building a robust, high quality program that will benefit JHAH patients for years to come."

What is Sarcopenia?

New JHAH Service: Sarcopenia Clinic



JHAH's Dhahran geriatric care team is pleased to announce the opening of the Sarcopenia Clinic.

Clinic services include:

- Diagnosing Sarcopenia in individuals above the age of
- Assessing nutrition and analyzing body composition
- Providing health education (nutritional and exercise plans)
- Follow-up on patient progress.

If you are between 50-70 years of age and interested in early detection and prevention, make an appointment with the Sarcopenia Clinic at the Main Reception in the Dhahran Primary Care, Building 50.

You can also schedule an appointment by calling the Centralized Contact Center (CCC) at 800-305-4444 if you are in Kingdom or +966-13-877-3888 if you are out of the Kingdom.

What is Sarcopenia?

Sarcopenia is a disease that is associated with aging. It causes a progressive loss of muscle mass and function. Symptoms include physical slowness and weakness with or without body weight loss. Onset of this disease process can start as early as your mid-forties. It can affect up to 30% of people above the age of 60 years.

What are the ill effects of Sarcopenia?

Sarcopenia can cause

- Weakness, slowness, poor balance
- Middle age weight gain and diabetes
- Weak bones (Osteoporosis)
- Repeated falls
- Loss of independence

What are the causes of Sarcopenia?

Researchers believe that Sarcopenia is caused by the interaction of multiple factors that are commonly seen with aging:

- Chronic inflammation
- Hormonal changes
- Motor neuron loss
- Altered protein metabolism

What else can cause muscle loss?

There are many examples of common chronic diseases that can cause muscle loss similar to Sarcopenia; however, Sarcopenia could be the cause of muscle loss if you do NOT have any of these:

- Chronic kidney disease
- Heart failure
- Chronic lung disease

- Parkinson's disease
- Stroke
- Cancer

Who is at risk?

- Older individuals
- Persons engaging in minimal or no physical activities
- Persons consuming a poor quality diet

How is Sarcopenia diagnosed?

The following criteria have to be met to make a diagnosis of Sarcopenia:

- Slow walking speed
- Weak hand grip
- Low muscle mass measured by bio-electrical impedance analysis or dual-energy X-ray (DXA)

Can Sarcopenia be cured?

Currently there is no cure for this condition. Scientific research is being conducted.

How can Sarcopenia be prevented?

Progression of this condition has been shown to be halted by certain exercise programs, a well-balanced and nutritious diet and nutritional supplements. Early detection and intervention can significantly delay the onset in older persons.

How can the JHAH Sarcopenia Clinic benefit me?

- Early diagnosis
- Effective exercise plans
- Dietary plans
- Follow up on plans and monitoring of the progression of the disease

How can I schedule an appointment with the JHAH Sarcopenia Clinic?

If you are between 50-70 years of age and interested in early detection and prevention, make an appointment with the Sarcopenia Clinic at the Main Reception in Primary Care Building 50.

You can also schedule an appointment by calling the Centralized Contact Center (CCC) at 800-305-4444 if you are in Kingdom or +966-13-877-3888 if you are out of the Kingdom. This automated, telephone-based system is available 24 hours a day, 7 days a week.

What can I expect at my initial visit?

A gerontology nurse will assess:

- Your weight, height and body mass index
- Your walking speed
- Your Hand Grip Strength (HGS using a dynamometer)
- Review your medical history

Individuals with normal walking speed and HGS will be discharged at this stage. If these tests are not normal, your assessment will continue with the following:

A geriatrician will:

- Review your medical history
- Review your current medications
- Conduct a physical examination
- Order certain tests (if necessary)
- Assess your physical activity level
- Work with you to implement an effective exercise plan that is specific to your fitness level and capabilities

A nutritionist will:

- Perform a nutrition assessment to identify any nutritional problems and develop a plan to address them
- Measure your body composition (proportion of body fat and lean mass)

You will be given an appointment with Radiology for a DXA examination.

How frequent are follow ups?

You will be given a follow-up appointment every six months.

To learn more about the Sarcopenia Clinic visit the Dhahran Primary Care Page.

A Drop of Life

Blood Donation

Human blood is the most priceless and vital element of human life. The collection of blood from voluntary blood donors is essential to guarantee the readiness and safety of blood when someone is in need.

Blood transfusions save lives. Unfortunately, many patients who need a blood transfusion do not have access to safe blood. The need for a blood transfusion can happen at any time, so blood banks need to keep an adequate supply of blood on hand.

A sufficient and reliable supply of safe blood depends on a regular supply of blood donors. When you donate one unit of blood, you help several patients because the blood is separated into platelets, plasma and packed red blood cells, which are divided into small volumes that allow for a single unit of blood to benefit multiple patients, including babies.

A little of your time and a simple needle prick can transform you into a superhero, helping medical staff save lives.

Remember, there is no substitute for human blood. Donate today at JHAH Blood Bank or you can drop into the Mobile Blood Donation Center on the day of a scheduled campaign.



Our blood bank was the first accredited transfusion service in the Kingdom of Saudi Arabia and has been meeting standards since 1977.

Fact

This year the JHAH Blood Bank obtained recertification with a 99.6% compliance rate from the American Association of Blood Banks (AABB).



For information about becoming a blood donor and the benefits of donating blood, or find the schedule of the mobile blood donation center, visit http://jhah.com/blood.aspx

Remember, you can still give blood at the Blood Donor Center in Dhahran in Building 62, Room 204 (Sunday to Thursday, 7 a.m.-3 p.m.). To register: Call the Blood Bank at (013) 877-6770 or (013) 877-6638, or email BloodDonation@JHAH.COM



Opening of the Mobile Blood Donation Unit

JHAH Chief Operating Officer, Faisal Al-Hajji opened the JHAH Mobile Blood Donation Unit on Monday, June 12, 2017.





Mobile Blood Donation Unit made its first trip on Sunday, June 18, 2017

Our customized Mobile Blood Donor Unit is the largest in the Eastern Province, accepting 6 donors at once and able to visit remote sites.

Register to donate blood at http://JHAH.com/blood.aspx







Health and Nutrition

Guidelines on Blood Donation



Blood donation is a noble action that saves lives. Below is some useful information for blood donors.

Blood Donation Facts

- Donating a liter of blood can save three lives
- Donation takes only about 20 minutes
- Blood donation has many health, psychological, and social benefits for blood donors
- Regular blood donation (4-5 times a year) is also good for the donor's health
- The volume of donated blood is 450 ml. There are 6 liters of blood in the body.

Importance of Nutrition and Hydration

- Adequate fluid intake and good nutrition help in replacing the donated blood within 24 hours of donation. Red blood cells need about eight weeks for complete replacement.
- Good nutrition provides your body with the nutrients and fluids needed to make new blood cells, avoid anemia and reduce the risk of dizziness.

Nutrients Needed

- Iron: Found in red meat, chicken, liver, egg yolk, fortified cereals, molasses, green leafy vegetables, dried fruits (such as dates, prunes, figs, apricots and raisins), dried beans, peas and lentils. Iron from animal sources is absorbed in the intestines better than iron obtained from plant sources. Vitamin C helps iron be absorbed from plant sources. It is found in tomatoes, broccoli, green peppers and citrus fruit especially oranges. It is advisable to combine vitamin C rich food with iron rich food from plants at the same meal.
- Folic Acid and Vitamin B12: Needed to form red blood cells. Folic Acid and Vitamin B12 are found in lean meat, eggs, whole grains and fortified cereals.
- **Protein:** Necessary to make new blood cells. Protein is found in milk and meat products, lean meat, seafood, chicken, eggs, dried beans, hummus and lentils.



General Safety and Health Guidelines

- Individuals who plan to donate blood and have high blood pressure or diabetes must have them under control.
- Anyone under the age of 17, low weight (weight under 50 kg), or those with infectious diseases or anemia CANNOT Donate.
- Donors are advised not to donate blood when they are hungry or dehydrated.
- Before donation: Drink an adequate amounts of water and eat a good meal two hours before donation. Drink water after blood donation to replace fluids as blood is mostly water. In addition, consume a fruit or drink a cup of fruit juice to prevent blood sugar from dropping. This is healthier than consuming fatty meals after blood donation.
- Eat healthy and well-balanced meals that are rich in protein, iron, and other nutrients and increase your fluid intake before and after blood donation. Good nutrition helps you to restore your blood volume after blood donation.

- Practice regular activity to strengthen your body and improve blood circulation. Avoid exercise (particularly strenuous exercise) immediately after blood donation.
- Practice deep breathing.
- Avoid alcohol and smoking (active or passive), as they do not help your body make new blood cells.
- Reduce caffeine intake, as caffeine reduces iron absorption, depletes the body's fluids and may lead to dehydration. It is better to replace caffeinated drinks with decaffeinated ones.
- If you wish to use vitamin or mineral supplements, it is advisable to speak to your physician first.
- Do not drive for long distances after blood donation.
- If you experienced dizziness during or after donation, inform the blood bank technician, keep your head lower than the donation chair, and drink an adequate amount of water (around 2 cups). It is important to not leave the donation chair by standing quickly. It is safer to stand up from the donation chair slowly to avoid falling.

6 Heart Health Mistakes Women Make

and How to Avoid Them



Despite the fact that heart disease is a leading cause of death for women, there's still a common misperception that it's "a guy thing." Women fear breast cancer more, even though they're eight times more likely to die of heart disease. "The message is getting out more, but women still need help understanding all their risk factors," says Pamela Ouyang, M.B.B.S., director of the Johns Hopkins Women's Cardiovascular Health Center in Baltimore, Maryland, USA.

See which, if any, of these heart health mistakes women often make apply to you.

1. Believing You'll "Know" When You Need to Get Your Blood Pressure Checked

It's great to be in tune with your body, but that approach alone has its limits. "Women often tell me, 'I got dizzy, so I knew my blood pressure was high.' You won't know when you have high blood pressure or high cholesterol—these are silent conditions," Ouyang says.

How to proceed: Get your blood pressure, blood cholesterol and blood sugar measured regularly by your doctor. They can flag your risk for future heart trouble.

2. Installing an Exercise Bike in the Home (and not using it)

By itself, having a bike or treadmill is great. Trouble is, you have to use it often, and that's where many women go wrong. They decide to embark on a new exercise program that's not fun, natural or convenient—and so, after an initial push, they slack off.

How to proceed: Pick an activity that's fun for you so you'll want to do it often, like walking around the mall.

3. Smoking to Keep Weight Down

Keeping your weight in the normal range is great for your heart, but using cigarettes for weight control snuffs out those good effects.

That's because smoking is a leading cause of cardiovascular disease.

How to proceed: Control your weight with diet and exercise.

4. Not Knowing the Warning Signs of Heart Trouble for You

Heart attack can present differently in women than it does in men. Expecting a chest-crushing episode, women ignore other danger signs.

How to proceed: If you notice nausea, abdominal pain, difficulty breathing or other bothersome symptoms that are unusual for you, it's important to consult with your doctor.

5. Avoiding Hormone Replacement Therapy at Menopause Because It's Bad for the Heart

Some women suffer unnecessarily through intense hot flashes and sleep disturbances. While it's no longer believed that hormone replacement therapy can protect the heart at menopause, that doesn't mean you need to avoid it. "For most women in their 50s, the established cardiovascular risk is low, and it's safe to take hormones," Ouyang says.

How to proceed: If you need to, take hormones for menopausal symptom relief. Try a prescription at the lowest possible dose for the shortest period of time you can.

6. Thinking Certain Health Problems of Pregnancy Ended with Your Child's Birth

Your baby may no longer be inside you, but your heart, arteries and other organs still are. If you have gestational diabetes or a hypertensive issue in pregnancy, such as pregnancy-induced hypertension or preeclampsia, your risk for heart problems is much greater later in life," Ouyang says.

How to proceed: Always inform a new doctor of your full health history so he or she has the information necessary to consider your individual needs.

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Pamela Ouyang M.B.B.S., M.D.

Director, Johns Hopkins Women's Cardiovascular Health Center

Professor of Medicine

Degrees

 MD; Medicine, St Bartholomew's Hospital Medical College (1974)

Residencies

- Pennsylvania Hospital Internal Medicine (1976)
- Johns Hopkins University School of Medicine Internal Medicine (1978)

Fellowships

 Johns Hopkins University School of Medicine Cardiology (1980)

Board Certifications

- American Board of Internal Medicine Cardiovascular Disease (1981)
- American Board of Internal Medicine Internal Medicine (1978)

Surprising Body Cues That Could Be a Heart Concern

Many of us brush off fatigue, shortness of breath and other issues as simple aging or we chalk them up to our hectic schedule. Research tells us they could be our body's way of informing us something might be off with our heart health.

The classic signs of heart trouble—chest tightness, pressure or pain—are far from its only signals. People often fail to connect other symptoms they're experiencing to their actual cause: the heart. This can result in failing to get the help they need for an emergency heart issue, like heart attack or stroke, or a critical delay in getting possible heart disease diagnosed and treated.

"Most people know their bodies better than any doctor does. In general, if you constantly feel something isn't 'right' or isn't what you're used to, that warrants medical attention," says Parag Joshi, M.D., a cardiology fellow with the Johns Hopkins Ciccarone Center for the Prevention of Heart Disease in Baltimore, Maryland, USA.

Your whole body can be involved in sending the message that something's wrong with your heart.

Direct (but Surprising) Signs of Heart Problems

Many heart-related body cues are closely linked to inadequate blood flow through the arteries to the heart. But signs like these may not seem obviously connected to the heart.

- Jaw and neck pain. Chest pain doesn't always center on the heart. It's of concern when it radiates to the jaw and neck from the chest.
- Nausea and bloating. Women in particular often describe this kind of discomfort, which can include vomiting, before they feel chest pain.
- Overall fatigue. When your heart can't pump effectively, less blood flows to your lungs and your muscles.
 Shortness of breath and fatigue when doing everyday activities, such as climbing stairs or walking across a parking lot, is a red flag.

Less Direct Signs of Heart Problems

Some problems may not have clear links to heart disease but are worth a heart checkup, especially if you have other risk factors for heart disease.

- Sleep apnea. This temporary collapse of an airway puts a halt to breathing during sleep and has been linked to high blood pressure and an increased risk of heart attack.
- Cramping, aching or numbness in the calves when you walk. This kind of leg pain, which is felt when you exercise and stops when you stop, can be a sign of peripheral vascular disease (PVD), a circulation disorder. People with PVD often have atherosclerosis, the buildup of damaging plaque in the arteries.

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Tips to Maintain Healthy Hearts for Women



Your Heart Health Starts Here



مركز جونز هوبكنز أرامكو الطبي Johns Hopkins Aramco Healthcare

How to Survive a Heart Attack When Alone

By: Suzan AbuDayeh

JHAH Associate Health Promotion Advisor Heartsaver/Basic Life Support Instructor Health Promotion Unit, Population Health Department

A heart attack is the result of a build-up of cholesterol, fat and other substances that causes plaque formation in the coronary arteries that provide blood flow to the heart. The plaque formation disrupts the blood flow and can damage the heart muscle.

Heart attacks often occur when people are alone. Knowing what to do when heart attack symptoms come on can save your life. People sometimes ignore symptoms of an oncoming, deadly heart attack and this can be fatal.



What should you do if you are alone and have a heart attack?

1. Call 110 (On-camp) or 997 (Off-camp) immediately. The most important thing to do when you suspect that you are having a heart attack is to call emergency medical services. Always call one of the numbers above before you attempt to contact anyone else. This will almost always be the quickest way to get treatment, and even if you live in an area that an ambulance may have a hard time getting to, the emergency dispatcher can provide you with instructions on how to minimize the damage.

2. Consider contacting someone to **come over immediately.** If you have a trustworthy neighbor or relative who lives nearby, make another phone call asking that person to come meet you. Having another person nearby can be helpful if you suddenly go into cardiac arrest. You should only do this if the emergency dispatcher gives you permission to get off the phone or if you have a second line you can call on while the dispatcher stays on the first line. Do not rely on another person to get you to the hospital. Wait for emergency paramedics to show up.

Signs and Symptoms

The most obvious symptom of a heart attack is chest ache, pain or discomfort. Chest discomfort usually occurs in the center of the chest; other symptoms include:

- A feeling of heaviness, tightness, pressure, aching, burning, numbness, fullness or squeezing. The pain can either last for several minutes, go away or come back repeatedly.
- Pains in the torso/upper body, including the arms, left shoulder, back, neck, jaw, or stomach
- Difficulty breathing/ feeling out of breath
- Sweating or "cold" sweating
- A feeling of fullness, indigestion or choking
- Nausea or vomiting
- Lightheadedness, dizziness feeling like you might faint
- Unexplained tiredness, weakness, extreme weakness (like you can't do easy tasks) or extreme anxiety reacting to symptoms
- Rapid or irregular heartbeat

- **3. Chew on aspirin.** Chew and swallow a single 325-mg or two tablets of baby aspirin 81-mg. This is especially effective if done within 30 minutes of your first symptoms. Aspirin inhibits platelet development. Taking aspirin can delay the formation of blood clots that could further block your arteries during a heart attack. Chew the aspirin before swallowing it. By chewing the aspirin, you release more of the medicine directly into your stomach and hasten its ability to get into your bloodstream. Do NOT use this treatment If you are on a medication that interacts poorly with aspirin or have otherwise been told by your doctor not to take aspirin or if you are allergic to aspirin
- 4. Do not attempt to drive. Driving yourself to the hospital is not recommended. If you begin to experience heart attack symptom while you are driving, immediately pull off to the side of the road. If you suffer from a cardiac arrest, you will pass out. This is the main reason why driving while suffering from a heart attack is not advised.
- 5. Remain calm. As frightening as a heart attack is, rushing around or putting yourself into a state of panic can worsen the problem. Relax as much as possible to keep your heart rate steady and calm. Count as a way of slowing your heartbeat. Make sure that your counts are slow, using the standard one-one-thousand, two-one-thousand, three-one-thousand counting approach.
- 6. Lie down. Lie on your back and raise your legs upward. This opens up the diaphragm, making it easier for you to breathe and supply oxygen to your blood. Make the position easier to maintain by propping your legs up on pillows or another object. You could also

lie down on the floor with your legs propped on a couch or chair. If you cannot immediately lie down or sit, such as working on a ladder or crossing traffic, make your way carefully. If you feel dizzy or unable to walk properly, watching a fixed object such as the horizon or a large fixed object might help calm you and help you control the situation until help arrives.

7. Take deep, steady breaths.

Even though your natural instinct might be to take rapid breaths when you experience a heart attack, the best way to maintain a steady supply of oxygen to your blood and your heart is to take slow, deep breaths. Consider lying down in front of an open window, open door, fan, or air conditioner. Providing yourself with a consistent stream of fresh air can help supply your heart with oxygen.

- 8. Do not attempt Cough CPR. A common myth is that you can survive a heart attack when alone by coughing in a particular manner. This probably won't work, and worse still, attempting this technique may put you in more danger. Attempting this procedure on your own can cause you to accidentally work against the rhythm of your heart and make it harder to get oxygen into your blood rather than easier.
- 9. Avoid food and drink. Eating and drinking are probably the last thing on your mind when you experience a heart attack, but just in case, you should avoid food and drink even if you want them. Having anything other than aspirin in your system can make it more complicated for paramedics to give you adequate treatment. If necessary, you can swallow a little water to help you get the aspirin into your system, but even this should be avoided if possible.

Follow-Up:

Talk to your physician about what to do in the future. Suffering a heart attack increases your risk of experiencing a heart attack in the future. When you survive your heart attack this time, you should talk with your physician to discuss ways of improving your chances of survival if you should suffer from one again.

Your physician can prescribe medications for treating cardiac problems including:

- Nitroglycerin to help widen the blood vessels and lower pressure on the arteries
- Beta blockers to block the hormones responsible for triggering stress responses in the heart and surrounding cardiac tissue.
- Blood thinners to lessen chances of blood clots and antistickiness meds for platelets, both of which help prevent future heart attacks due to blockage of the arteries in the heart.

You should get treatment for your heart attack within the first hour of your initial symptoms. If you wait longer than that, your heart will have more difficulty repairing the damage/cell death in muscles of the heart. The ultimate goal is to have the constricted artery back open within 90 minutes to minimize damage as much as possible.

It is also important for you to talk to your physician about ways to reduce your risks of experiencing further heart disease through diet, exercise/cardiac rehab, sleep and other lifestyle changes.

People-Centered Design

Delivers more than just a new look for the Main Lobby

First impressions are something that impact our thinking. If something looks good, we tend to look at it with a positive light, and the opposite is true. Recently, the first place that many patients, families and visitors see—the main entrance to Johns Hopkins Aramco Healthcare Dhahran, was renovated and reopened.

The three stage renovation project was more than skin deep. The Dhahran Lobby was expanded to double its former size to accommodate our patients and their families in greater comfort and with more convenient access to services. The people-centered design features include a view of the sanctuary garden, generous natural light and a new food service.

The interior finish has marble flooring and comfortable furniture, creating a welcoming, relaxing environment. Patient services available in the new lobby include the Welcome Guides who escort people to their destinations. This combined with more available and expansive visitor seating makes the lobby an ideal starting point for your JHAH experience.

Of course first impressions need to be followed up with positive actions, and that is evident in Dhahran in the modernized pharmacies, the recently accredited residency programs, the first ever in-kingdom nursing doctorate program, and the extended specialty clinic hours. It is also marked in the districts with the recently opened ER and specialty clinics in Al-Hasa.

These are all patient-centered examples of JHAH's commitment to enhancing the health and wellbeing of the people we care for and being a regional leader in patient and family experience, clinical outcomes and the advancement of health professions.









"The lobby space has doubled in size to meet the needs of our patients and their families."

Faisal Al-Hajji Chief Operating Officer JHAH POPULATION HEALTH WELLBEING | JUL 2017

Population Health

Launches Network Case Management Program

JHAH launched a network case management program in April 2017 in close collaboration with Johns Hopkins Healthcare (JHHC) in Baltimore, which also manages care in an affiliated network. Nurse Case Managers are assigned to specific hospitals to work with the outpatient clinic physicians and staff to coordinate and support the care of high-risk patients. The program was launched in the first five hospitals April 3 following a six-month intensive planning process (workflows, documentation, tracking, communication with the network providers) and a complete redesign of the functions of the JHAH Care Management Division.

The objective is to improve patient self-management, to coordinate care, patient safety, medication management, resource use and improve patient empowerment. Ultimately, the program is meant to slow the progression of disease in our high-risk medical recipients and reduce their need for extensive outpatient or inpatient care, readmission or inappropriate emergency use.

Program Eligibility

Members with complex medical conditions and/or multiple conditions are contacted by a case manager who will assess their health status, work with them to develop a self-management plan, as well as help them get the right care. The case management program that offers them a variety of support services designed to help her/him understand and better manage their condition.

"My view is that population health is everyone's business. We will need to work together to provide healthcare services that are provided at the appropriate place, by the appropriate provider, at the appropriate time."

Anita Moore,

Chief Population Health Officer

What is a Case Manager?

Case Managers are skilled nurses and social workers who provide the patient with support, guidance, and encouragement. Case managers work closely with the patients as well as their healthcare provider to help patients manage their health.

Saudi Aramco eligible medical recipients who meet the criteria are encouraged to take advantage of the health management programs.

The case management program offers a variety of support services:

- Assists patients to fully understand the available healthcare resources and services
- Ensures patients receive the appropriate follow-up and needed medical equipment
- Coordinates patients care and provides patients and their families with the needed health education.
- Collaborates with patients' healthcare providers to ensure their plan of care is developed, followed and modified as needed
- Communicates with patients regularly by phone
- Assists patients with transitions and discharge planning (e.g., home to hospital, hospital to home, hospital to hospital)
- Facilitates family meetings regarding healthcare matters

The inpatient case manager

- Facilitates and coordinates the patients' plan of care based on their needs.
- Assesses the appropriateness of care during hospitalization
- Develops a clear discharge plan in partnership with the multidisciplinary team as well as the patient and her/his family

The outpatient case manager:

- Facilitates and coordinates access to healthcare services.
- Assists in the navigation of the healthcare system
- Promotes self-management by empowering patients with care solutions and appropriate resources
- Promotes self-management by empowering patients with care solutions and appropriate resources

You Started

Something Amazing!



Johns Hopkins Aramco Healthcare (JHAH) conducted the third annual Saudi Aramco employee and dependent Health Assessment (HA) Survey from October to December 2016. The results show that many of you are ready to "Start Something Amazing" regarding your health.

Anita Moore, Chief Population Health Officer, JHAH, commented that, "The HA survey gives us valuable self-reported health information that can be used to create targeted programs to improve the health and wellbeing of the community we serve."

"The number of Aramco employees and family members who responded to this year's HA Survey increased significantly," reported Dr. M. J. Ghamdi, Director of Population Health, JHAH. "Most impressive was the number of people who are eager to take action to improve health by reducing stress, losing weight, improving their diet and increasing exercise."

The Survey says...

The survey findings tell us that fifty – seven percent (57%) of our population are at Rising Risk for developing one or more chronic diseases, such as diabetes, heart disease, and/or depression.

Thirteen percent (13%) of those surveyed are at High Risk and already have one or more chronic diseases that require treatment. Thirty percent (30%) of participants reported being in generally good health and having good health habits including eating a balanced diet, exercising regularly and not smoking, which puts them in a Low Risk category.

JHAH is here to support you...

The JHAH Population Health
Department has used the HA data to
develop both community programs and
personalized interventions to support
JHAH and Saudi Aramco employees and
their families to improve their health.

JHAH offers workplace wellness, weight reduction, smoking cessation and health education and promotion programs to assist in preventing chronic disease. These programs are ideal for those who are in the Rising Risk category. They will receive an email with more information.

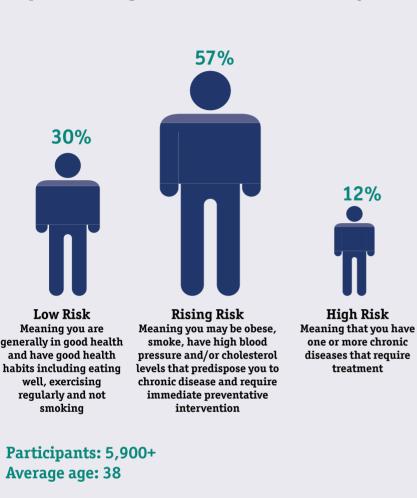
JHAH has also designed a personalized outreach program for those who are in the High Risk category and who indicated that they would like to be contacted. They will be called by a JHAH case manager. Case managers are registered nurses with clinical expertise who ensure access to primary care physicians and specialists to develop and implement an individualized, comprehensive care plan.

Your health, our commitment

Watch for a promotional email and be sure to take the 2017 HA survey later this year. Your survey information is kept confidential. Taking the survey every year provides you with valuable information about your health and how it's changing over time. The survey results will be used by JHAH Population Health to design and delivery programs that meet the needs of JHAH and Saudi Aramco employees and their families.

JHAH & Saudi Aramco Employees and Their Families Start Something Amazing

Important findings from Health Assessment survey



Dependent

%23

Employee/ Dependent

Employee

%77

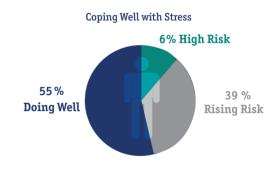
"We must lead the kingdom in creating sustainable, positive change in the health and wellbeing of our community."

Anita Moore, Chief Population Health Officer Johns Hopkins Aramco Healthcare (JHAH)

Population Health Definition

Population health uses data to design services and programs that focus on improving health and well-being of the population. The approach is to empower individuals, families and communities with health information and tools that emphasis personalized prevention and self-management.

Emotional wellbeing is just as critical as physical health:



The Survey results indicate that most people are ready to improve their wellbeing:

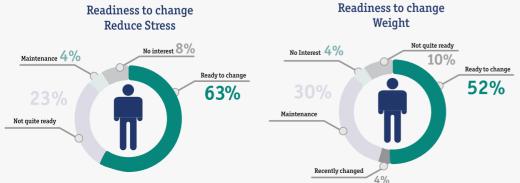
Male

%72

Gender

Female

%28

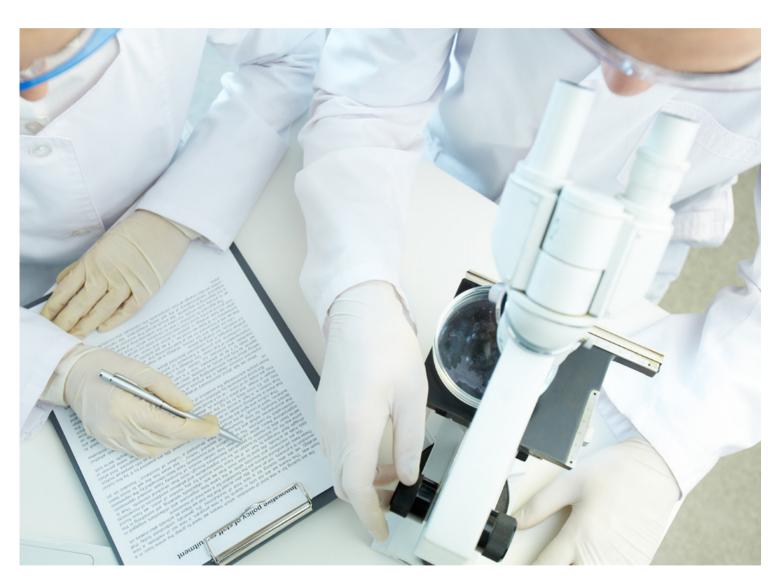


Readiness to change Improve Nutrition



JHM and JHAH Drive Medical Discovery

With Collaborative Clinical Research



"Innovation in medical research is how health care moves forward," says Brian Matlaga, a urologist at Johns Hopkins Medicine (JHM).

Clinical researchers help explain disease development and risk factors, identify new therapeutic approaches to improve treatment outcomes, evaluate public health interventions, and increase patient safety and satisfaction. The discoveries they make today fuel the future of health care.

When Johns Hopkins and Saudi Aramco formed Johns Hopkins Aramco Healthcare three years ago, they quickly aligned to develop clinical research capabilities at JHAH and help propel the Kingdom's ongoing drive for international competitiveness in biomedical research and technology.

"Medicine, best practiced, is based on evidence and research," says Dr. Salwa Sheikh, founder and chair of JHAH's Institutional Review Board.

Prior to the joint venture's launch, a highly motivated group of investigators in the hospital had already laid a good foundation from which to grow a research program.

"Our clinical staff was always interested not only in keeping abreast of the latest developments in their fields, but also in contributing to research by writing scholarly articles," says Dr. Abdulrazack Amir, the chief of academic affairs and a nephrologist at JHAH. "We had the interest and the background, but we didn't have a fully established research program at that time."

In 2012, these pioneers created an informal research office at JHAH to provide administrative support and established an institutional review board from scratch in 2013 to ensure appropriate research methodology.

"They had accomplished quite a bit," says Matlaga, a key JHM leader of JHAH's research program. "The idea now with JHAH is to capture those energies and provide more support, whether it's infrastructure or education, for them to continue to build on top of that foundation."

JHM is well-poised as JHAH's research collaborator: Of all U.S. academic medical centers, Johns Hopkins receives the most funding from the National Institutes of Health (~\$584.7M in 2015), and it dedicates the most in total research and development spending (\$2B+ in 2016), according to National Science Foundation rankings.

"Hopkins' research enterprise is really enormous, so we bring a lot of expertise to further spur team-based scientific pursuit at JHAH," says Nae-Yuh Wang, a JHM associate professor of medicine in biostatistics and epidemiology. "JHAH's leaders share our vision of including research as part of their own mission. We have a great opportunity to share our experience with JHAH so they can create a system that works for them."

Following an initial assessment in September 2014, joint work began to enhance JHAH's research program, clearly defining the needed infrastructure, establishing research-ready databases and making the environment even more encouraging for research possibilities. Working through this process, JHAH established an official

research office to elevate how medical research is viewed and performed at JHAH.

JHM and JHAH were also connecting likeminded investigators from both organizations, promoting a multidisciplinary approach to research and providing ample education and training opportunities.

Last December, JHM and JHAH jointly presented an intensive, three-day course titled "Introduction to Clinical Research" to nurture the research culture at JHAH. "We wanted to establish the right concept of research methodology with our staff," says Amir. "It was a great opportunity for them to learn from masters in research education and training." Nearly 30 JHAH health care providers participated and teamed up to draft three research proposals that they will refine and present at a research summit at JHAH this coming December.

Meanwhile, progress will continue to inspire clinical research and contribute to position JHAH as a leader in medical innovation.

"We are making significant moves toward establishing a research center that will help JHAH enhance the health and wellbeing of the people we care for in an environment of growth and learning," says Amir.

By: Kristen Pinheiro

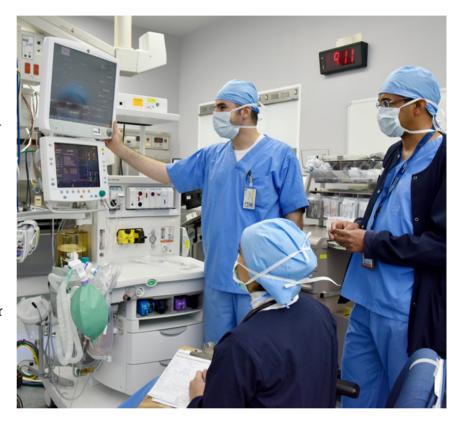
Senior Communications Specialist Johns Hopkins Medicine International

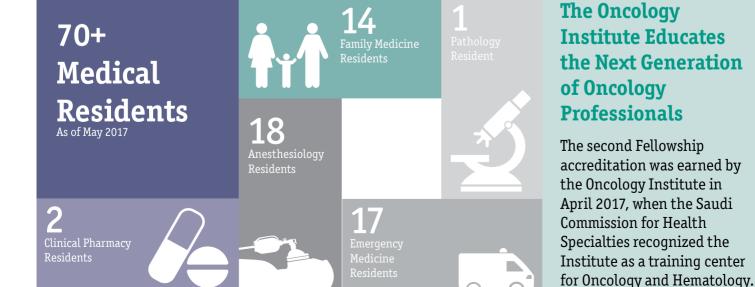
Medical Residency Program

Medical Residents in Action

The first 13 Saudi Commission medical residents commenced training at JHAH in October 2016, positioning JHAH as a medical educational institution in Saudi Arabia. Medical residency is formal, academic, post-graduate medical training for licensed physicians to receive advanced instruction in a particular specialization. Very few private healthcare organizations in Saudi Arabia are accredited as medical residency training centers. JHAH offers medical residents a valuable educational setting in which they benefit from an evidence-based medical care model and exposure to "consultant-based patient care" services.

Realizing the dream of a residency program at JHAH began to gain momentum in May 2016 following the successful survey and accreditation by the Saudi Commission for Health Specialties for five programs: Pathology, Pharmacy, Emergency Services, Anesthesia and Family Medicine as training centers.





JHAH HIGHLIGHTS WELLBEING | JUL 2017

JHAH Highlights

Greeted with a smile



On April 3, 2017, the Al-Hasa Health Center opened its new outpatient services, and immediately patients visited were met with a ready smile and assistance from the folks in the Meet & Greet Program. The program is designed to make the visits of patients and their family easier by escorting them to their appointments or desired locations. The program will be expanded to the inpatient entrance when that service is opened in the third quarter.

A team of inspectors from the College of American Pathologists (CAP) recertified the Johns Hopkins Aramco Healthcare (JHAH) Clinical Laboratory & Pathology Services. During the inspection, the team examined operations and performance based on a checklist of more than 5,000 CAP standards. The overall compliance rate was 99.7%.

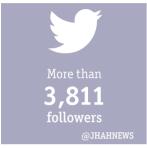
The JHAH laboratories have been accredited since 2000. This is the 9th CAP inspection that JHAH laboratories and pathology services have passed with only minor deficiencies. The CAP Laboratory Accreditation Program is conducted every two years and is designed to ensure excellence in laboratory testing through peer inspection and education.

JHAH Clinical
Laboratory & Pathology
Services Score
99.7% for College of
American Pathologists
(CAP) International
Accreditation
Recertification



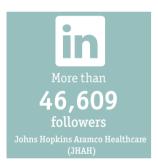
CONNECT WITH JHAH WELLBEING | JUL 2017

Connect with JHAH













PatientRelations@

JHAH.com

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

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.

Broaden your horizons with a career at Johns Hopkins Aramco Healthcare.

Johns Hopkins Aramco Healthcare is pleased to announce the availability of job slots for qualified Saudi nationals.

To apply, visit www.JHAH.com/careers

JHAH BULLETIN BOARD WELLBEING | JUL 2017

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.)

Walk-In Care Clinic

What You Need to Know

What is the Walk-In Care Clinic?

The Walk-In Care Clinic is an after hours clinic available to patients who have medical conditions that cannot wait for regular clinic hours.

When Should I go to the Walk-In Care Clinic?

Please visit the Walk-In Care if you are experiencing an urgent but non-life threatening condition that does not require immediate emergency medical care. Urgent conditions include but are not limited to

the below:

- Sprains and strains
- Moderate back problems
- Mild asthma exacerbation
- Eye irritation and redness
- Fever or flu
- Vomiting and diarrhea
- Sore throat or cough
- Skin rashes and infections
- · Urinary tract infections

What are the working hours of the Walk-In Care Clinic?

Dhahran:

In Dhahran, the Walk-In Care Clinic hours are:

Weekdays: 4 p.m. to 9 p.m.

Weekends and Holidays: 7:30 p.m. to 9 p.m.

Districts:

In the districts, the Walk-In Care Clinic in Abqaiq and Ras Tanura is provided in the Emergency Room area, and in al-Hasa it is provided in the Urgent Care Unit adjacent to the Emergency room.

Working hours of the districts' Walk-In Care Clinics:

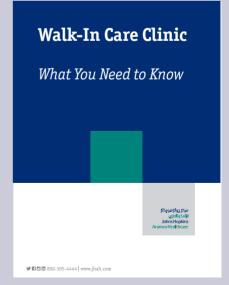
Weekdays: 3 p.m. -11 p.m.

Weekends and Holidays: 7 a.m.-11 p.m.

What are the services not offered at the Walk-In Care Clinic?

The following services are not offered in the Walk-In Care Clinic:

- Well Physical Examination (Check-up)
- Non-Urgent Care
- Referrals of any type
- Elective, non-urgent procedures (suture removal, dressing changes, skin treatments)
- Prescription refills
- Laboratory test results
- Routine immunizations and preparations of immunization records
- School/routine physicals
- Test results or requests
- X-ray results or requests
- Routine follow up for chronic problems
- Routine follow up for chronic skin problems
- Routine referrals to specialty
- Liquid nitrogen treatment, ear irrigation or other minor procedures
- Routine injections or injections ordered by other hospitals



For the full version of the Walk -In Care Clinic information booklet, pelase visit the following website: www.JHAH.com

NEW HOURS WELLBEING | JUL 2017

New Hours

The JHAH Dhahran Primary Care, Specialty and Walk-In Care Clinics

Dhahran Primary Care and selected specialty clinics will extend their hours of service from 4 p.m. to 6 p.m. (last patient accepted at 5.30 p.m.). This is another way that JHAH is delivering more convenient access to care for you and your family.

Additionally, the JHAH Dhahran Walk-In Care Clinic weekday operating hours will be as follows:

Walk-In Care Clinic Hours

- Sunday Thursday: 4 p.m. to 9 p.m.
- Friday Saturday and holidays: 7.30 a.m. to 9 p.m.

In case of a urgent medical condition out of hours, please visit JHAH Emergency Medical Services (EMS)

Visit www.JHAH.com for a full list of clinic hours of service



مركز جونز هوبكنز أرامكو الطبي Johns Hopkins Aramco Healthcare

Thinking About Doing Something Different?

JHAH's Dental Services Department is hiring

Are you interested in furthering your career in a patient and family care oriented environment where your contributions are valued?

Johns Hopkins Aramco Healthcare (JHAH) will foster your professional growth to help you broaden your competencies and develop lifelong employability skills.

Join JHAH as we fulfil our potential as a trailblazing organization dedicated to the health and wellbeing of the people we serve and the advancement of medical knowledge.

Opportunities for dental professionals are available in the following fields:

- Dental Laboratory Technician
- Pediatric Dentist
- General Dentist
- Dental Therapist