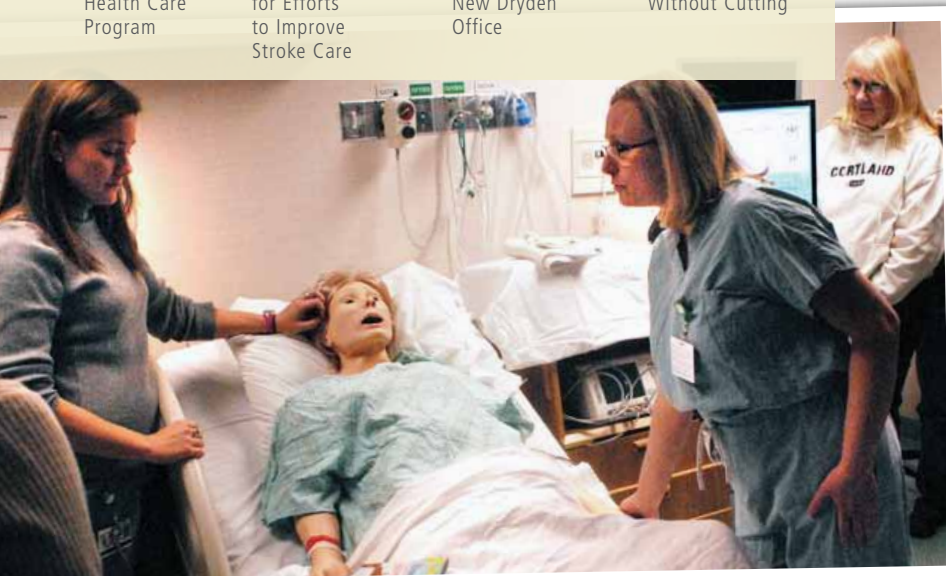


healthierTIMES

A QUARTERLY PUBLICATION FOR THE COMMUNITY OF CORTLAND REGIONAL MEDICAL CENTER

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DR. ANNA MARIE GARCIA (R.) ASSESSES "PATIENT" DURING BIRTHING SIMULATOR DEMONSTRATION. PHOTO COURTESY OF THE CORTLAND STANDARD.

A VERY SPECIAL DELIVERY

Innovative Birthing Simulator Comes to CRMC

IT SEEMS LIKE AN AVERAGE DAY IN THE CORTLAND REGIONAL MATERNITY DEPARTMENT. LED BY AN OBSTETRICS PROVIDER, A TEAM OF NURSES WORKS TOGETHER TO DELIVER A BABY. One nurse is checking the fetal heart rate while another is ensuring mom is in a comfortable and safe position. The team is communicating and acting decisively. Only this isn't an average delivery; it's a hands-on training session. And both mother and child are life-like mannequins and part of the sophisticated NOELLE™ Maternal and Neonatal Birthing Simulator, recently acquired by CRMC to ensure the highest possible level of maternity care.

Dr. Anna Marie Garcia, an obstetrician/gynecologist, is impressed with just how realistic the childbirth simulator is, and that it allows for intensive and in-depth training for the entire birthing team.

"It's important that we work as a cohesive team during each and every birth," said Dr. Garcia.

"We've got to communicate with each other, making sure we're all on the same page."

It's important that we work as a cohesive team during each and every birth.

Plus, I think it's important that we practice different birthing scenarios. With practice, our actions become more automatic and we can cut down the potential for errors."

CRMC is one of only a few hospitals in Central New York with its own birthing simulator. Cortland Regional staff brings over 500 newborns into the community annually. The birthing simulator gives the maternity team more opportunities to optimize its procedures and prepare for complicated births. Some hospitals just send their staff for brief off-site training using the simulator but Cortland Regional went one step further and purchased the unit. This larger investment is already paying off as the maternity team is able to keep its skills sharp to ensure exceptional patient safety.

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PARKINSON'S DISEASE PATIENTS FIND THEIR VOICE

Advanced LSVT Treatment Now at CRMC

CAN YOU IMAGINE NOT BEING ABLE TO KNOW HOW LOUDLY OR SOFTLY YOU'RE SPEAKING?

Or, you need to convey something important but only a soft sound comes out. For the six million people worldwide who have Parkinson's Disease, they often struggle with the perception of their own speech volume. Initially, the disease causes slight tremors, a shuffling gait, and speech difficulties. As it progresses, these symptoms become more noticeable and significantly affect day-to-day life for patients. Unfortunately, while 80 to 90 percent of Parkinson's patients have speech difficulties, less than five percent get treated for their speaking problems.



SPEECH LANGUAGE PATHOLOGIST JILL TOFTEGAARD USED LSVT TO HELP JOE CALABRO. PHOTO COURTESY OF THE CORTLAND STANDARD.

"I wanted to increase awareness of voice problems related to Parkinson's Disease, and offer a new treatment option to those in the Cortland community," recalled CRMC speech language pathologist Jill Toftegaard. "So, in the spring of 2010, I became certified in an advanced, evidence-based method called the Lee Silverman Voice Treatment or LSVT,"

Named after a Parkinson's patient, LSVT starts with a patient-physician consultation to ensure the patient is healthy enough for the treatment. The initial consultation rules out any problems with the vocal chords, lungs, or respiratory conditions that may impact treatment. Then, the patient begins the LSVT program, which lasts four weeks, with hour-long sessions four days a week.

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“This is powerful technology,” said Lisa Seyfried, RN. “We saw just how much the simulator would benefit us and most importantly, the safety of our patients. We acquired the simulator and were taught how to most effectively utilize it for training right here at CRMC.”

One of the primary benefits of the simulator is the ability for nurses to perform “drills” involving infrequent but serious birthing scenarios. For example, a current focus is ensuring nurses know the signs of post-partum hemorrhage, which is an emergency situation. Because the simulator is so realistic, the nurses react in an equally real-life manner, responding quickly and accurately in this high-pressure scenario. Through repeat “drills,” each nurse gains confidence and perfects the skills needed to keep the mother and baby safe. Other emergency situations are addressed through repeated drills such as neo-natal resuscitation.

The childbirth simulator also allows for video-taping of the team’s performance before, during, and after a simulated birth. This is one of the most valuable assets of the technology, according to Tammy Finn, RN, Maternity Nurse Manager. The nurses’ performance during these simulated sessions is now a mandatory component of their training and credentialing at CRMC.

“Not only is our team keeping their technical skills sharp, we’re improving our communication with each other during the birthing process – and in emergency situations. Fluid, calm teamwork between the provider, nurses, and mother is essential to a comfortable and safe delivery experience for our patients,” noted Finn.



DR. ROSEMARIE HURLEY OVERSEES NURSING TEAM, AND INTERACTS WITH “MOM AND COACH,” DURING BIRTHING EXERCISE.

Patient safety is always a priority. That’s why CRMC is constantly integrating the latest proven technology that provides a strong benefit to our community. By incorporating the birthing simulator into the Maternity Services Department training process, the already high levels of safety, comfort and compassion for both mom and baby – are reaching new heights.

Finn noted that the purchase of the birthing simulator was due to the generosity and fundraising efforts of CRMC Hospital Aid, a volunteer organization dedicated to provide funding and services to the maternity, nursery and pediatric areas of the medical center.

“Thanks to Hospital Aid we were able to bring this amazing technology here. We are extremely fortunate to have such a great group of dedicated volunteers. They work tirelessly for our hospital.”

*Interested in learning more about our Maternity Department?
Please call (607) 756-3750 to arrange a personal tour.*



CARDIOLOGIST MARC BAKER, M.D., PH. D.: FROM NEW ORLEANS TO CORTLAND

At the Heart of His Practice is Dedication to the Patient

IT IS OFTEN SAID THAT TRUE CHARACTER IS REVEALED IN TIMES OF GREAT CHALLENGE. THIS WAS DEFINITELY THE CASE FOR A RECENT ADDITION TO THE CORTLAND REGIONAL MEDICAL CENTER MEDICAL STAFF.

Dr. Marc Baker found himself trapped with his patients for days in a New Orleans hospital during Hurricane Katrina. At the time, he was completing his residency at Louisiana State University. When the waters came, the hospital’s generators in the basement were flooded out. Working with limited resources, Dr. Baker rose above the danger and chaos to deliver compassionate, patient-focused care. His experiences made him a better doctor and now, Dr. Baker has brought his dedication and expertise to the Cortland community.

“I now have a deeper respect for the patient-practitioner relationship,” explained Dr. Baker. “During Katrina, I experienced firsthand just how much patients rely on their physicians. I take my role very seriously, and will go to great lengths to keep patients informed, safe, and healthy while under my care.”

When Katrina hit and the power was lost, patients on ventilators were in grave danger. Dr. Baker and a few others rushed to a nearby building and ran cords from the neighboring generator. They also went out in boats to gather up supplies for patients, literally risking their lives. Before he even thought about being rescued, Dr. Baker began evacuating his patients – relaying them to the rescue boats and Red Cross stations. After five days,

he was finally rescued himself. Remarkably, a few of his rescuers were people he had recently treated. A testament to the strong bond that Dr. Baker had formed with his patients.

After losing their home to Katrina’s destruction, the Baker family moved back to Upstate New York. Dr. Baker had grown up in Hilton and received his bachelors of science degree from SUNY-Geneseo, so returning to the region felt natural to him. For the next three years, he worked on completing a fellowship in Cardiology at Rochester’s Strong Memorial Hospital. His next move? Cortland and Cortland Regional Medical Center.

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ADULT DAY HEALTH CARE PROGRAM CONTINUES TO FLOURISH

ACCORDING TO JACKIE TIER, R.N., DIRECTOR OF ADULT DAY HEALTH CARE (ADHC), WHEN THE PROGRAM FIRST OPENED ITS DOORS, THE STAFF CARED FOR JUST EIGHT REGISTRANTS. That was back in 1993. The program was designed to accommodate up to 19 registrants a day in its spacious Adult Day Room and before long, reached that number. In 1998 the New York State Department of Health approved an increase to 24 daily participants. Again due to growing interest, the NYSDOH granted yet another increase in registrant capacity in the fall of 2010...this time to 33.

“I think the continued growth and popularity of our Adult Day Health Care program illustrates that it is fulfilling an important community need,” said Tier. “We asked for more slots because there is a waiting list, it’s a unique program for this area and provides a great service to the community. It is also the only adult medical day program in either Cortland or Tompkins County.”

The ADHC program, located in the Cortland Regional Nursing and Rehabilitation Center, offers assistance to adults with a medical condition who live at home alone, or with their caregivers. The program is a “medical model,” meaning it can

“We asked for more slots because there is a waiting list, it’s a unique program for this area and provides a great service to the community. It is also the only adult medical day program in either Cortland or Tompkins County.”

provide service for adults who require medical and/or rehabilitative treatment. This includes anything from administering medications and filling prescriptions to physical, occupational or speech therapy.

Registrants are provided nursing, case management, clinical management, medical, diagnostic, social, rehabilitative, recreational and personal care services on a regular basis. Services are provided according to the assessed needs of the registrant, and range from monitoring, observing and maintaining an individual’s health status to aggressive interventions and utilization of resources.

According to Tier, anyone 18 years or older with a medical condition who receives physician approval can be admitted to the ADHC. She noted that Medicaid will pay for the program, as well as some long-term care insurances.

“Our program plays an integral role in the continuum of care that the hospital and nursing and rehabilitation

center offer,” noted Tier. “Additionally, we provide a unique alternative to nursing home placement, within a facility that provides a full array of acute and long term care services.”

ADHC is open Monday through Saturday from 7:30 a.m. to 4:00 p.m. The program is staffed daily with a registered nurse, a licensed practical nurse and two nursing assistants. Nursing care is blended with a variety of fun and stimulating social activities ranging from community outings, picnics, and pet therapy, to crafts, bingo, baking, and exercise.

“We think our program makes a real difference to a lot of our registrants,” said Tier. “They feel like they’re a part of a family.”

For more information on enrolling in the Adult Day Health Care Program, please call (607) 756-3918.



CHRISTINE CRANDALL, LPN,(C) DECORATES CHRISTMAS COOKIE JARS WITH DALE MILLER AND FRANCES HEATH.





TELEMEDICINE HAS HELPED EMERGENCY ROOM PHYSICIANS TO MORE QUICKLY DIAGNOSE AND TREAT AREA STROKE PATIENTS.

CRMC RECOGNIZED FOR EFFORTS TO IMPROVE STROKE CARE

CORTLAND REGIONAL MEDICAL CENTER IS PARTICIPATING IN THE AMERICAN STROKE ASSOCIATION'S "GET WITH THE GUIDELINESSM-STROKE" PROGRAM. The goal of the program is to improve the overall quality of care for stroke patients by improving acute stroke treatment and preventing future strokes and cardiovascular events.

"Get With The Guidelines-Stroke" was developed to help hospitals employ proven science-based treatment guidelines, including those developed by the American Stroke Association (ASA), American Heart Association and Brain Attack Coalition. These guidelines address acute stroke management, primary prevention of cardiovascular diseases, secondary prevention of strokes and the establishment of primary stroke centers.

"Get With The Guidelines-Stroke" participating hospitals are encouraged to develop a comprehensive system for providing rapid diagnosis and treatment of stroke when patients are admitted to the emergency department. CRMC was recognized for initiating a partnership with University Hospital at SUNY Upstate Medical Center in Syracuse to use telemedicine technology to more quickly diagnose and treat area stroke patients. By using a web camera and secure Internet connection, a neurologist at University Hospital can see and remotely examine a stroke patient in the CRMC Emergency Room. The neurologist then consults with the emergency room physician on the best course of care, including the use of clot-busting medications when appropriate.

CRMC is also increasing its efforts to prevent secondary strokes through the aggressive use of medications such as statins and anti-platelets as indicated in the secondary stroke prevention guidelines. Other methods include the treatment of atrial fibrillation and atherosclerosis and management of smoking cessation, weight, exercise, diabetes and cholesterol.

Through "Get With The Guidelines-Stroke," the American Stroke Association provides CRMC training and staffing recommendations, care maps, discharge protocols, standing orders, data-collection and measurement tools. The

program also facilitates creating and sharing best practices among participating hospitals.

"This initial recognition from the ASA is for participation in data collection and submitting it," said Joan Skawski, CRMC Director of Quality Improvement and Case Management. "We look forward to increased participation which entails comparing our scores to others in the program."

According to the American Stroke Association, each year approximately 795,000 people suffer a stroke — 610,000 are first attacks and 185,000 are recurrent. Every 40 seconds, someone in the United States is suffering from a stroke. This deadly condition accounts for one out of every 18 deaths in the United States.

“Every 40 seconds, someone in the United States is suffering from a stroke.”

REGIONAL MEDICAL PRACTICE OPENS DRYDEN OFFICE

THE ADMINISTRATION OF REGIONAL MEDICAL PRACTICE (RMP) IS PLEASED TO ANNOUNCE THE OPENING OF A NEW MEDICAL OFFICE AT 129 NORTH STREET IN DRYDEN.

RMP is an affiliate of Cortland Regional Medical Center. It presently operates physician offices in Cortland specializing in anesthesia, cardiology, general surgery, obstetrics and gynecology (OB/GYN), and orthopedic surgery.

According to Dr. Robert Karpman, CRMC Vice President for Medical Affairs who oversees Regional Medical Practice, Tompkins County residents will now have access to the same quality specialist care as Cortland residents.

“‘Quality care, close to home’ is more than a slogan, it’s our promise at Regional Medical Practice. Our physicians are all well trained and highly skilled, with expertise that rivals any found in larger cities. Cortland residents need look no further than their own community to find quality specialty care. Now families in Dryden, Groton, Freeville, Lansing, and other communities will have access to that same high level of care.”

The RMP-Dryden office is now accepting new patients needing cardiology, OB/GYN, and general surgery services.



DR. DAVID MAYO



DR. JORGE DAVIDENKO

CARDIOLOGIST MARC BAKER, M.D., PH. D.
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“My family is thrilled to be here. The kindness, honesty, and politeness of the Cortland community reminds us of the South,” remarked Dr. Baker. “We feel so welcome here at Cortland Regional, and it’s a pleasure to interact with such hard-working, dedicated people – those are the kind of people I really enjoy working with and caring for.”

As a cardiologist, Dr. Baker works to prevent and treat heart conditions so that his patients can lead their healthiest life possible. He specializes in a variety of cardiac conditions including heart failure, arrhythmias, post-heart attack care, cardiac risk management, hypertension, high cholesterol, familial heart problems, and pacemaker/defibrillator management. He sees people with both new and chronic conditions, and collaborates with Dr. Jorge Davidenko and nurse practitioner Lisa Snyder as members of Regional Medical Practice–Cardiology.



Dr. Jorge Davidenko and Dr. Marc Baker will treat cardiology patients. They specialize in the diagnosis and treatment of a wide variety of cardiac conditions, including heart failure, arrhythmias, post-heart attack care, cardiac risk management, familial heart problems, and pacemaker/defibrillator management. Appointments can be made by calling (607) 756-3561.

Dr. David Mayo provides a full range of women’s health services, from prenatal care and childbirth, to reproductive and gynecologic primary care, as well as related surgical procedures. He can be contacted for an appointment at (607) 662-0103.

Dr. Kye Bang, Dr. Ho Woon Lee, and Dr. Christopher Moheimani are general surgeons with primary focus on thoracic, vascular, and laproscopic surgery. Appointments can be made by calling (607) 753-0700.

“I couldn’t ask for a better team than RMP-Cardiology and the CRMC Cardiology Department,” added Dr. Baker. “Dr. Davidenko is so experienced and knowledgeable. We have a symbiotic, consultative relationship, and I’ve been able to share some of the latest techniques I was exposed to in my work at Strong Memorial. Cardiac patients are receiving a higher level of care because of our partnership.”

“One of the most important things I learned from Katrina is the amazing amount of trust patients put into their physicians,” concluded Dr. Baker. “Each day, Dr. Davidenko, myself, and the nursing staff are working to continue earning that trust by providing the best cardiac care possible.”

***To schedule an appointment with
Regional Medical Practice–Cardiology call (607) 756-3561.***

BALLOON SINUPLASTY

Sinus Surgery Without the Cutting

PATIENTS SUFFERING FROM CHRONIC SINUSITIS NOW HAVE A SAFE, RELATIVELY PAINLESS, MINIMALLY INVASIVE OPTION TO TRADITIONAL SINUS SURGERY. Sinusitis is one of the most common chronic health problems in the U.S., afflicting 37 million Americans each year. Patients suffer headaches, congestion, fatigue and other symptoms. This condition significantly impacts an individual's physical, functional, and emotional quality of life. 80% of patients can be treated with medication therapy. The remaining 20% may require surgery, which can be painful (bone and cartilage removal), risky (performed within millimeters of the eyes and brain), and have an uncomfortable recovery.

Now there is a third option: the Balloon Sinuplasty system by Acclarent. It is safe, relatively painless, and minimally invasive. CRMC otolaryngologist Dr. Manoj Kumar began performing balloon sinuplasty about a year ago, and has done many procedures to date.

A thin guide wire equipped with a tiny balloon is threaded into the nostrils up to the area of blockage. Dr. Kumar inflates the balloon just enough to open the passageway. The procedure takes approximately 30 minutes and is done as outpatient surgery at CRMC, so the patient is home the same day. Balloon sinuplasty is clinically proven with studies showing that its results are equal to or better than traditional surgery.

"The Balloon Sinuplasty technology is a true advance in sinus care because in many cases it can be done without removing any tissue or bone," said Dr. Kumar. "That means faster recovery times and less post-procedure discomfort. In fact, many of my patients have been able to return to normal activities within 24 hours and have had significant improvement in their symptoms."

To learn more about Balloon Sinuplasty visit cortlandregional.org/surgery_department/ENT

What Are The Symptoms Of Sinusitis?

Symptoms of sinusitis vary from person to person. While one person may have all of the symptoms, someone else may have only one or two of them.

Acute sinusitis is usually painful, while chronic sinusitis is generally more uncomfortable than painful.

The most common symptoms are:

- Stuffy or runny nose
- Sneezing and/or coughing
- Pain over the bridge of the nose
- Headache that is worse in the morning, when bending forward, or when riding an elevator
- Frequent throat clearing
- Itchy eyes and nose
- Reduced sense of smell and/or taste
- Fever and chills
- Pain in the roof of the mouth or teeth
- Face and eye pain

PARKINSON'S DISEASE

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"The process is intensive, but it really works," said Toftegaard. "It's based on a series of exercises that target vocal loudness. Our primary focus is regulating the volume and intensity of speech which improves the patient's ability to be understood."

For example, a patient will practice saying a long vowel sound such as "ahhh" loudly for several seconds. This and other exercises are repeated continuously over an hour as Toftegaard gives feedback. She watches for posture and makes certain patients don't strain their vocal chords while focusing on the volume. Toftegaard also utilizes software that measures decibels and frequency to document patient progress. In addition to these exercises, the patient also practices useful phrases such as greetings like "hello, how are you this afternoon?"

"Our goal is to get the patient back to their life so they can participate more fully in social activities, and enrich their connections with friends and family," added Toftegaard. "For example, after LSVT therapy, a patient can more actively and confidently contribute to discussions in a church group or book club."

Since gaining her certification, Toftegaard has successfully worked with a number of patients who have each benefited from the LSVT technique. As more patients with Parkinson's Disease utilize her expertise, she is tracking their progress with the software program. She hopes to use the data to show just how much of a positive impact LSVT can have on a patient.

In addition to treating Parkinson's patients, CRMC speech language pathologists work with cognitive, fluency, voice and swallowing conditions (such as dysphasia). Many of the speech pathology cases at CRMC are the result of a stroke or other neurological disorder such as dementia. Speech therapists also work within the short-term rehabilitation program, and helping children with developmental delays improve their speech and language.

"The LSVT process is just one example of how we are integrating the latest techniques and technology into our treatment plans," concluded Toftegaard. "For example, our department acquired a 'fiber optic endoscopic evaluation of swallow' system, or FEES, which provides a more accurate assessment of a patient's swallowing disorder – and allows us to better plan for treatment. We have the staff, training, and technology to address a wide spectrum of speech issues here in Cortland on an outpatient basis."

To learn more about LSVT, or speech language pathology at CRMC, please call (607) 756-3606.

WINTER WEATHER TIPS

from the American Heart Association



A combination of colder temperatures and physical exertion increases the workload on the heart.

The American Heart Association says that for most people, shoveling snow may not lead to any health problems. However, the association warns that the risk of a heart attack during snow shoveling may increase for some, stating that the combination of colder temperatures and physical exertion increases

the workload on the heart. People who are outdoors in cold weather should avoid sudden exertion, like lifting a heavy shovel full of snow. Even walking through heavy, wet snow or snow drifts can strain a person's heart.

To help make snow removal safer, the American Heart Association has compiled a list of practical tips:



GIVE YOURSELF A BREAK. Take frequent rest breaks during shoveling so you don't overstress your heart. Pay attention to how your body feels during those breaks.

DON'T EAT A HEAVY MEAL PRIOR OR SOON AFTER SHOVELING. Eating a large meal can put an extra load on your heart.

USE A SMALL SHOVEL OR CONSIDER A SNOW THROWER. The act of lifting heavy snow can raise blood pressure acutely during the lift. It is safer to lift smaller amounts more times, than to lug a few huge shovelfuls of snow. When possible, simply push the snow.

CONSULT A DOCTOR. If you have a medical condition, don't exercise on a regular basis or are middle aged or older, meet with your doctor prior to the first anticipated snowfall.

BE AWARE OF THE DANGERS OF HYPOTHERMIA. Heart failure causes most deaths in hypothermia. To prevent hypothermia, dress in layers of warm clothing and wear a hat.



HEART ATTACK WARNING SIGNS

Some heart attacks are sudden and intense — the "movie heart attack," where no one doubts what's happening. But most heart attacks start slowly, with mild pain or discomfort. Often people affected aren't sure what's wrong and wait too long before getting help. Here are signs that can mean a heart attack is happening:

Chest discomfort. Most heart attacks involve discomfort in the center of the chest that lasts more than a few minutes, or that goes away and comes back. It can feel like uncomfortable pressure, squeezing, fullness or pain.

Discomfort in other areas of the upper body. Symptoms can include pain or discomfort in one or both arms, the back, neck, jaw or stomach.

Shortness of breath with or without chest discomfort.

Other signs may include breaking out in a cold sweat, nausea or lightheadedness

If you even suspect you may be having a heart attack, go immediately to the CRMC Emergency Department.

FOR MORE INFORMATION, VISIT YOUR PHYSICIAN.
NEED A PHYSICIAN? WE CAN HELP.

Call Cortland Regional Medical Center
Physician Referral Center at (607) 756-3523

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Visit our website for news, information and a calendar of currently offered health education classes and class descriptions.

www.cortlandregional.org

CORTLAND REGIONAL MEDICAL CENTER is interested in your comments! Please write or call and let us know your thoughts on this newsletter or any of our healthcare services.

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