



HEALTHY AND HAPPY:

Darling, front row center, with her Ellison 7 colleagues

Sweet support

HOW NICE, was Amanda Darling's initial reaction when she received the call from her surgeon. *A personal call.*

Darling now laughs at the recollection. "That's actually what I thought," she says. The registered nurse on Ellison 7 recalls how – after working the night shift in May 2013 – she awoke to a voicemail requesting she return the call regarding the results of a core biopsy on a suspicious lump in her breast. "But the doctor said, 'Amanda, I have your results and it's not good. You have breast cancer.'"

She was 27 years old.

It had already been a whirlwind of a year. Darling had just started at the MGH on the Surgical Trauma Unit in January – just days later, her mother was diagnosed with endometrial cancer. "It was a difficult time, but everyone on the unit was just so nice. They didn't even know me, but they were so supportive and worked with me so I could have a flexible schedule to go with my mom during her treatments," Darling

says. "And then a few months later, I had to tell them I had cancer."

The ensuing seven months were marked by a medical leave filled with chemotherapy, surgery, and radiation to treat the invasive ductal carcinoma. But, Darling says, her days also were full of an enormous amount of support, generosity and kindness from her colleagues who showered her with cards, calls and prayers. Darling also found a welcome distraction before and after hospital visits in baking cupcakes. "Baking was really a blessing," she says. "It kept me busy, which was perfect. Every time I had treatment, I brought a batch with me to share with staff and patients. I was known as the 'cupcake girl.'"

When Darling's Ellison 7 colleagues heard about – and tasted – her passion for baking, they pooled together funds and purchased a KitchenAid Stand Mixer. It was a top-of-the-line model, Darling says. "And it's pink, of course. They just dropped it off on my doorstep with (Continued on page 4)

A positive partnership

WHEN CINDY CANDAMIL WAS READY to give birth to her second child at the MGH, she became one of the first patients to benefit from a budding partnership between the midwives of the MGH Vincent Obstetrics and Gynecology Department and Birthing Gently. The Boston-based organization of doulas – nonmedical labor coaches – offers physical and emotional support before, during and after childbirth. The MGH Midwifery Service now offers free doula support to some of its patients through the new volunteer doula program.

"I had a doula when I gave birth to my eldest daughter," Candamil says. "I couldn't imagine giving birth without a doula in the delivery room – I was so grateful I could have one at the MGH."

Midwives have been a vital component of the Vincent Obstetrics and Gynecology Department since its establishment at the MGH in 1994. They (Continued on page 2)

WARM WELCOME: Candamil with her daughters



— Partnership

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embody a compassionate and family-friendly practice that complements the values of MGH midwives, says Autumn Cohen, a certified nurse midwife at the hospital. “I knew having this type of program would benefit a lot of our patients here. When I was updating the list of doulas in the Boston area, I asked if they offered free or reduced services.”

Tara Poulin, a certified doula and founder of Birthing Gently, offered her already-established volunteer program, which coordinates doula services for hospitals in Massachusetts, southern New Hampshire and New York City. “We have nearly 45 birth doulas in the volunteer program. Some of our volunteer doulas are working toward certification; others have been volunteering their services since I started the program 12 years ago.”

Volunteer doula services at the MGH typically include one prenatal visit, 24/7 prenatal phone support, attendance at the birth and two hours postpartum, and one follow-up phone call. For Candamil, her experience was a little different. “I met my doula for the first time in the delivery room — I was induced two weeks before my due date — but it felt like I knew her forever. She was very sweet and had a calming presence. She massaged me, guided me through the breathing exercises and helped me cope with the pain.”

Cohen says numerous studies have documented that with the support of a doula, women are less likely to have pain relief medications administered, less likely to have a cesarean birth, and report having a more positive childbirth experience. While the statistics are favorable, Cohen adds that it is not all about the numbers. “This is about providing support for women during a life-changing and physically overwhelming time,” she says. “We are in the delivery room as much as possible, but there are women who need more. Having that extra person completely dedicated to them really improves the outcome of birth and can make a big difference.”

The volunteer doula program gives priority to women who are in the most need, such as those who lack support or who have special health risks. Midwives identify patients who would benefit from a volunteer doula and coordinate efforts with Birthing Gently.

For more information about the volunteer doula program, contact Cohen at acohen0@partners.org.



WOUND HEALERS: Members of the MGH Wound Care team

Caring for chronic wounds

WITH RISING LIFE EXPECTANCY in the U.S. and the increasing prevalence of chronic medical conditions, the need for advanced treatment of chronic wounds also is on the rise. Most wounds heal normally over time; however, chronic or slow-healing wounds may require a dedicated approach to help them fully heal.

As a result of this growing patient population, the MGH has expanded its Wound Care Program, which promotes the rapid healing of wounds using skin debridement, advanced topical therapies and dressings, and surgical treatments. The program — organized within the MGH Vascular Center — is led by Michael Watkins, MD, who will serve as its medical director; Virginia Capasso, RN, PhD, advanced practice nurse; and Keith Marple, administrative director.

“The need to better coordinate the expertise of many specialists to care for these complicated patients made this a sound investment for the institution,” says Ann Prestipino, senior vice president of Surgical and Anesthesia Services and Clinical Business Development.

The expanded program now includes wound care in Waltham as well as a new coordinated phone line and electronic referral form to manage patients regardless of the underlying condition. Staff can refer patients with non-healing wounds to the program using the “Wound Care Program” form in CRMS, or at the 6-HEAL referral line (617-726-4325). Given the many different clinical specialties that take part in the care of wounds, a referral coordinator will ensure the right specialists are involved in each patient’s care.

“Chronic wounds can be incredibly painful and debilitating, but with the expert collaboration of many teams around the hospital, we can create a comprehensive solution to heal these wounds,” says Michael R. Jaff, DO, medical director of the Vascular Center.

For more information, email Marple at kmarple@partners.org. ■

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