

47 Years Working  
with Ostomates



January/February 2021  
Volume 47 Issue 3

## Metro Maryland Ostomy Association, Inc.

Phone: 301-946-6661

E-mail: [info@MarylandOstomy.org](mailto:info@MarylandOstomy.org)

WEB: [www.MarylandOstomy.org](http://www.MarylandOstomy.org)

15800 Crabbs Branch Way

Suite 300

Rockville, MD 20855

**Dear Metro Maryland Supporters,**

*Wishing you and yours  
health and prosperity in the New Year.*

Check out our NEW Website at [marylandostomy.org](http://marylandostomy.org). Many thanks goes to Rena Munster for her expert skills and dedication of time and effort to update our website!

As mentioned in the last newsletter MMOA has its own subscription to Zoom so the link will remain the same for each meeting. The easiest way to get the link is to go to our website. Instructions are on page 2 of this newsletter for where to find the virtual meeting information.

Our December meeting presented by Jearlean Taylor was a highlight to our last meeting of 2020. Jearlean's inspiration was just what we needed as we look forward to living successfully with an ostomy.

How you think about a quarantine is vital. The terms we use to describe the situation sets the emotional tone for how we feel about it. If we think in terms of what we're being *forced* to do and what we *won't* have access to, it creates a sense of lack and powerlessness. Anxiety and panic can start to creep in, not to mention boredom and apathy. Combine that with a lot of uncertainty and endlessly dire newsfeed, and you have a recipe for mental health disaster. However, if we can stay focused on the things that we still **can** do and what we still **do** have, while creating a basic structure for our days that resembles our old routine, we can mitigate feelings of anxiety and depression and get through these next weeks/months successfully – maybe even happily. *Advice from psychologist, Linda Soucek, Psy. D.*

Metro Maryland is very grateful to all who have supported us with their donations. We know that for many this period of Covid-19 has made it very difficult to make ends meet. You may donate any time of year! All Donations are gratefully accepted and are Tax-Deductible. Again, "thank you" on behalf of ostomates that depend on us for support.

***Sincerely,***  
***MMOA Board Members***

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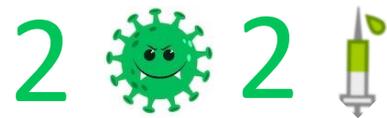
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## Welcome to You!

*“One of the most beautiful compensations of  
this life is that no one can sincerely try to  
help another without helping himself.” ~  
Emerson*

Metro Maryland Ostomy Association, Inc. is a registered 501(c)(3) tax-exempt, non-profit organization dedicated to the education, rehabilitation and assistance of those living with an ostomy or alternate procedure.

**Metro Maryland Ostomy Association  
is having monthly Zoom meetings  
for the foreseeable future  
due to Covid-19.**

**January 10, 2021 meeting at 12:00 Noon**  
*ConvaTec Representatives Lisa and Cheryl will  
be joining us and sharing their products.*

**Three ways to get the Zoom link:**

- 1. The surest way to join the Zoom meeting is to go to our website:**  
[marylandostomy.org](http://marylandostomy.org)
  - Click on “Join Us,” then
  - Click on “Meetings”
  - You will see the link or phone number.

**OR**

- 2. Using the link below.**  
Right click on the link, then on the drop-down menu choose  
**OPEN HYPERLINK:**

<https://zoom.us/j/97761387637?pwd=VFVDaUJ1ZFZROUZZbTIUekxyM09odz09>

**Meeting ID: 977 6138 7637**  
**Passcode: 924413**

**OR**

- 3. To join by phone: 3017158592**

**\* \* \* \* \***

**If you need an ear or assistance,  
have questions or want to speak  
with an ostomate about your concerns,**

**Do Not Hesitate to email  
Metro MD Board members  
willing to help during the pandemic:  
Michele Gibbs: [michelegibbs305@yahoo.com](mailto:michelegibbs305@yahoo.com)  
Paul Hudes: [babb11@verizon.net](mailto:babb11@verizon.net)  
Sue Rizvi: [sahr9839@gmail.com](mailto:sahr9839@gmail.com)**

**or**

**leave a message at the office,  
301-946-6661.**

**A Recipe for Every Measure of Health and  
Happiness in the New Year.** (original title, “Christmas by  
the Cupful,” Author Unknown)

A heaping cup of happiness,  
2 of love and caring,  
1 of understanding,  
1 of joyful sharing.  
A level cup of wisdom,  
1 of artful living,  
1 of thoughtful insights,  
1 of selfless giving.  
Mix ingredients together,  
Toss in a little flair,  
Serve to everyone you know  
Topped with a tiny prayer. ☐

**Advocacy Victory! The Removing Barriers to  
Colorectal Cancer Screening Act has been  
signed into law!** Received from Jeanine Gleba, Manager  
UOAA Advocacy, Dec. 30, 2020.

On December 27, 2020 President Trump signed the  
Removing Barriers to Colorectal Cancer Screening Act  
into law where it was tucked into the year-end  
appropriations package!

An amendment was added to the bill to phase this out-  
of-pocket cost out over time, and now this “medicare  
loophole” will be nonexistent by 2030. Let's say good-bye  
to 2020 and the “polyp penalty”!

For almost a decade UOAA's advocates, the Digestive  
Disease National Coalition, thousands in the colorectal  
cancer community, and many more have been  
relentlessly sending emails, making phone calls, and  
meeting with their Members of Congress urging them to  
pass this Act. Your dedication and perseverance has paid  
off!

Over 400 members of the House and Senate supported  
this bipartisan bill. The 116th Congress ended yesterday  
so please take a moment to send a quick note of  
appreciation for their support in getting this Act over the  
finish line.

Click this link to log in and send your message to  
Congress:

<https://www.votervoice.net/BroadcastLinks/Rey8HgToiGOueFr2NYZNtg>

**Get Your Flu Vaccine  
This New Year  
If You Haven't Got It Yet!**

## Lockdown has Affected Your Memory – Here’s Why

by Claudia Hammond, author of *The Art of Rest*. 16th November 2020, excerpts by Metro Maryland.

Many of us have found ourselves in an isolated routine during the pandemic – and it turns out, that’s not very good for our memories.

If, since lockdown, you have found it hard to remember to email someone, summon up the word you need, or yet again forgotten to buy the milk – you are not alone. I’ve lost count of the number of times recently that friends have bemoaned their worsening memories.

Data is not, of course, the plural of anecdote and it’s too early for research comparing our memory skills before and after the Covid-19 pandemic. But in a survey conducted by the Alzheimer’s Society, half of relatives said that their loved ones’ memories had worsened after they began living more isolated lives. Limits on socializing within care homes and in some cases a ban on any visitors for many months seems to have taken its toll.

In the University of California Irvine beginning research on the lockdown affecting people’s memories, they reported that even some of those amazing people who usually remember events like buying a cinema ticket 20 years earlier because they have highly superior autobiographical memory are finding they are forgetting things.

There are, of course, several different types of memory. Forgetting what you intended to buy is different from forgetting someone’s name or what you did last Tuesday. But research on how memory works points to several ways in which our newly constrained environment could be having an impact.

The most obvious factor is isolation. We know a lack of social contact can affect the brain negatively and that the effect is most serious in those already experiencing memory difficulties. For those with Alzheimer’s Disease, levels of loneliness can even predict the course of disease.

Of course, not everyone has felt lonely during the pandemic, and the results of some studies have shown that levels of loneliness have plateaued over time.

The monotony of Zoom calls, usually on the same screen day after day, makes it hard for individual meetings to stand out. But even if we do not feel distressed at a reduction in human contact, many of us are still seeing fewer people than usual.

As holidays get cancelled, weddings are postponed, concerts and sporting events go ahead without live audiences, we have less to talk about. And as for tales of woe at work, they’re mainly about the frustrations of technology letting us down.

Repetition of stories helps us to consolidate our memories of what happened to us – so-called episodic memories. If we can’t socialize as much, perhaps it’s not surprising that those memories do not feel as crystal clear as usual. When we do get the chance to chat, we also have fewer stories to tell.

It’s true that you might be compensating with more online socializing. But those conversations are not quite the same. You might be less likely to mention the

inconsequential things that have happened. To make it worth preserving with delays or drop outs, your story needs to be worth telling. If your threshold for what counts as interesting enough to say has risen, then once again you miss out on underlining those memories.

But there is more to it than a lack of socializing. Many people mention feeling a background anxiety to life now. Even if you appreciate how lucky you are, and know others have it worse, the sense that the world has become a more uncertain place can be hard to shake off.

At University College London, psychobiologist Daisy Fancourt and her team have been conducting research in the UK throughout the pandemic on how people have felt. Although levels of anxiety peaked when lockdown started and have gradually reduced, average levels have remained higher than in usual times, especially in people who are young, living alone, living with children, living on a low income or in urban areas.

Meanwhile, the Office of National Statistics in the UK has found that rates of depression have doubled. Both depression and anxiety are known to have an impact on memory. Worries tax our working memories, leaving us with less capacity available for remembering shopping lists or what we need to do for work.

This is all made more difficult by a lack of cues to aid our memories. If you go out to work then your journey, the change of scenery and breaks you take punctuate the day, giving you time points to anchor your memories. But when you work from home, every online meeting feels quite similar to every other online meeting because you tend to sit in exactly the same place in front of exactly the same screen. There is less to tag your memories too to help you distinguish them.

As Catherine Loveday, professor of cognitive neuroscience at the University of Westminster puts it: “Trying to remember what’s happened to you when there’s little distinction between the different days is like trying to play a piano when there are no black keys to help you find your way around.”

As well as the days merging into one, so do the things you do in those days. At home there are no cues to help you remember the different parts of your work. Every memory is tagged to sitting at your computer. At work you might remember exactly where you had a conversation – by the lifts or in the office kitchen – and that helps you not to forget it.

Then there’s a general fatigue, which also doesn’t help our memories. Zoom meetings are tiring, some work is much harder from home and holidays are getting cancelled. A lack of routine and anxiety about the pandemic can disturb our sleep. Put all that together – basically we’re consistently tired.

So with the combination of fatigue, anxiety, a lack of cues, and fewer social interactions, it’s no wonder that some of us feel our memories are letting us down.

And Loveday believes there is an additional factor involved – one that we might not have noticed: the impact on our brains, and our memories in particular, of spending time in different geographical locations.

Finding our way back home has always been important to our survival. As soon as we leave home, we start paying attention. Whether we are navigating our way through a forest or around a town, we make more use of the seahorse-shaped brain region known as the hippocampus. The studies showing that those black cab drivers in London who learned every back street end up with a larger hippocampus.

We need to engage the hippocampus in order to remember new information, but Veronique Bohbot, a neuroscientist at McGill University in Canada, has found that if people's lives become more confined and repetitive as they age, their use of the hippocampus decreases.

The good news is that there are things we can do about it. Going for a walk, especially along unfamiliar streets, will bring your brain back to attention. And even moving makes a difference. Do you have to sit at your desk for every meeting? If it's a phone call could you walk along the street chatting instead?

Making sure the weekdays and the weekends are different enough not to merge into one can help with the distortions our new life can have on our perception of time.

Loveday advises adding more variety to our lives, which might involve some creative thinking to achieve. If you can't go out, she suggests finding a completely new activity at home, and then telling someone about it afterwards to help you remember it better.

Deliberately reflecting on your day each evening can help you consolidate your memories. You could even write a diary. It's true that less happens that's noteworthy these days, but it could still be interesting to look back on one day. It can also help your memory right now.

And if you're forgetting to do things, then making lists and setting alerts on your phone can make more difference than you might think. You can also harness your own imagination. If you want to remember to buy milk, bread and eggs, then before you go picture yourself visiting each of the necessary aisles in the actual shop you are going to. When you get there, this imaginary shopping trip will pop back into your mind and you're more likely to remember everything you need. □

### **Signs, Symptoms and Preventing of UTI in People with a Urostomy** – Sources are The Wound Ostomy and Continence Nurses Society and Hollister Incorporated Websites.

A urostomy (also known as ileoconduit or colon conduit) is a surgically created opening on the abdomen that drains urine. An ostomy pouch is used to collect the urine. During waking hours, the pouch is drained into the toilet. At nighttime, the pouch is connected to a larger collection system to allow for uninterrupted sleep and to prevent reflux into the kidneys.

Urinary Tract Infection - Due to the changes in the body following surgery, there is higher risk for urinary tract infection (UTI).

The signs and symptoms of UTI may be different than before surgery.

If you notice any of these symptoms, contact your healthcare professional or stoma care nurse right away:

- Cloudy urine
- Dark or bloody urine
- Urine with bad odor
- Extra mucus (it is normal for the urine from a urostomy to have small shreds of mucus)
  - a) Fever
  - b) Back pain/flank pain
  - c) Abdominal pain
  - d) Nausea or vomiting

A urine sample is needed to check for UTI. The sample should not be taken directly from the used urostomy pouch. The correct procedure should be followed to avoid contamination of the urine sample. Contamination can result in incorrect culture results and improper use of antibiotics.

UTIs can also lead to kidney problems. The good news is that a few diet changes and ostomy pouch routines can help you avoid this issue.

To help prevent UTIs, follow these guidelines:

- Drink at least 6 to 8 glasses of water each day. Drinking plenty of fluids is key to keep UTIs at bay.
- Avoid consuming large amounts of caffeine and alcohol. These can dehydrate you and make you more susceptible to UTIs.
- If you use a night drainage system, make sure to thoroughly clean the leg bag or container.
- Empty your pouch when it is one-third to half full. □

### **Nine Nonobvious Ways to Have Deeper**

**Conversations:** The art of making connection even in a time of dislocation. by David Brooks, Opinion Columnist at New York Times

Wouldn't it be nice, even during a distanced holiday season, to be able to talk about this whole experience with others, in a deep, satisfying way?

1. **Approach with awe.** C.S. Lewis once wrote that if you'd never met a human and suddenly encountered one, you'd be inclined to worship this creature.
2. **Ask elevating questions.** All of us have developed a way of being that is our technique for getting through each day. But some questions, startling as they seem at first, compel us to see ourselves from a higher vantage.
3. **Ask open-ended questions.** Many of us have a horrible tendency to ask questions that imply judgment: Where did you go to school? Or we ask yes/no questions: Did you have a good day? Which basically shut off interesting answers.
4. **Make them authors, not witnesses.** The important part of people's lives is not what happened to them, but how they experienced what happened to them.
5. **Treat attention as all or nothing.** Of course, we all have divided attention. In "You're Not Listening," Kate Murphy writes that introverts have more divided attention

than others while in conversation because there is so much busyness going on in their own heads.

6. **Don't fear the pause.** Most of us stop listening to a comment about halfway through so we can be ready with a response. In Japan, Murphy writes, business people are more likely to hear the whole comment and then pause, sometimes eight seconds, before responding, which is twice as long a silence as American business people conventionally tolerate.

7. **Keep the gem statement front and center.** In the midst of many difficult conversations, there is what the mediator Adar Cohen calls the gem statement. This is the comment that keeps the relationship together.

8. **Find the disagreement under the disagreement.** In the Talmudic tradition when two people disagree about something, it's because there is some deeper philosophical or moral disagreement undergirding it.

9. **The midwife model.** Sometimes people talk to solve a person's problem. The Rev. Margaret Guenther wrote that a good conversationalist in these cases is like a midwife, helping the other person give birth to her own child...by listening. *Read total article at <https://www.nytimes.com/2020/11/19/opinion/nine-nonobvious-ways-to-have-deeper-conversations.html>* □

**Urolithiasis** by A. Trudeh, RNET, Lexington; via Worcester (MA) New Diversions, via Anne Arundel OA, MD

Urostomates, ileostomates and transverse colostomates have one thing in common: continuous output with a loss of fluids. If the liquid intake does not exceed the output, these ostomates may be dehydrating their bodies, making themselves prone to a condition called "urolithiasis," which refers to the presence of stones in the urinary system.

These stones may be found anywhere from the kidney to the bladder. They vary in size from mere granular deposits, called sand or gravel, to bladder stones the size of an orange. In the majority of stones, 90% are composed of calcium, with 5-8% uric acid and 1-3% cystine accounting for the rest.

Conditions which predispose to stone formation are: (1) infection, (2) periods of immobility, (3) concentrated urine, (4) abnormally high concentration of calcium in the blood, (5) heredity and (6) dehydration.

If you were to develop urolithiasis, the symptoms you may experience are:

(1) low back pain and/or severe, sharp pain in the lower back radiating to the groin; (2) chills, fever; (3) difficulty or burning with urination; (4) blood in the urine; (5) nausea, vomiting and diarrhea. See your physician as soon as possible if any of the above symptoms appear.

Measures to prevent stone formation are: drink 2 to 3 liters (quarts) of fluid daily – preferably water and juices. Include acidic juices such as cranberry to maintain acid urine which helps prevent infection. Urinate during the night if necessary. Exercise daily. Use caution with foods containing calcium. Since a certain level of calcium is required for good health, restrict your diet only with the advice of a physician.

Kindness is more than deeds.

It is an attitude, an expression, a look, a touch.

It is anything that lifts another person.

~ Plato

**MMOA can no longer accept donated ostomy supplies at our office because of the lack of storage.**

### **3 Options for Donating Unused Ostomy Supplies:**

- 1) In Silver Spring **Medical Supply Loan Closet** at Lutheran Church of St. Andrew  
15300 New Hampshire Ave.  
Silver Spring, MD 20905  
To donate call or text Marilee Tollefson at 301.254.9115 or email [marileetollefson@gmail.com](mailto:marileetollefson@gmail.com), to arrange a day and time to drop off.  
The Closet operates a large medical loan closet with a large inventory of donations for pick up. There is no cost and no means assessment. Items are dispensed on a first come, first served basis. Examples of supplies available for pick up include: hospital beds, bedside commodes, canes, walkers, rollators, wheelchairs, feeding formula and equipment, CPAP, colostomy, and diabetic supplies.
- 2) **Friends of Ostomates Worldwide FOW - USA.**  
4018 Bishop Lane  
Louisville, KY 40218  
[www.fowusa.org](http://www.fowusa.org) - [info@fowusa.org](mailto:info@fowusa.org)  
You may include open packages by bagging and labeling them with item name, size and manufacturer. Remember, no liquids or expired supplies.
- 3) **Osto-Group**  
Stephanie S. Sullivan  
3500 45th Street, Suite #16A  
West Palm Beach, FL 33407  
Tel: 877/678-6690 — Fax: 561/627-3686  
Osto-Group is a non-profit organization that provides donated ostomy supplies to uninsured ostomates in the US for the cost of shipping and handling. All organizations will give receipts for tax purposes, but you must make your own itemized list with costs.

## HOSPITAL AND WOC NURSES

### MARYLAND:

ANNE ARUNDEL - Annapolis – 443-481-5508  
*Michelle Perkins, RN, Jennifer Davis, RN & Joyce Onken, RN*  
CHESAPEAKE-POTOMAC HOMEHEALTH AGENCY, Clinton;  
1-800-656-4343 x227 or 301-274-9000 x227  
DOCTORS' COMMUNITY - Lanham – 301-552-8118 x 8530  
*Ellyce Green, RN*  
HOLY CROSS - Silver Spring – 301-754-7295  
*Rezia Lake, WOCN, Agya Gautam, RN*  
HOWARD COUNTY GENERAL - Columbia - 410-740-3160  
MEDSTAR MONTGOMERY MEDICAL CENTER - 301-774-8731  
*WOCNs: Carolyn D'Avis, Patricia Malone, Carolyn Carroza*  
MEDSTAR SOUTHERN MARYLAND HOSPITAL CENTER-  
Clinton MD – Lucy Jupierrez, RN - 301-877-5788  
NAT'L INSTITUTES OF HEALTH - Bethesda - 301- 451-1265  
*CWOCNs: Karen C Chandler-Axelrod & Quinn Cassidy*  
PRINCE GEORGES - Cheverly - 301-618-2000 or 301-618-6462  
SHADY GROVE ADVENTIST – Rockville - 240-826-6106  
*WOCNs at Wound Center: Sue Hilton, Shay Jordan, Anita Wong, and Raquel Wilson.*  
*Cancer Care Navigator – 240-826-6297*  
SUBURBAN - Bethesda - 301-896-3050 - *Melba Graves, WOCN*  
ADVENTIST HEALTHCARE – White Oak - 240-637-4000  
*WOCNs: Barbara Aronson-Cook, Carol Caneda – 240-637-5908*

### FOR MILITARY ONLY:

MALCOLM GROW MED CTR, ANDREWS AFB –  
Suitland, MD, Phone 240-857-5911/3083  
BETHESDA NAVAL/ WALTER REED NATIONAL MILITARY  
MEDICAL CENTER - Bethesda, MD - 301-319-8983/4288  
*WOCNs: Paz Aquino & Sharon May; Dawn Ford, WOCN*  
V.A. MEDICAL CTR - Washington. D.C., 202-745-8000/8495/93  
*Page WOCNs: Leslie Rowan, Natalie Tukpak*

### WASHINGTON DC:

CHILDREN'S NATIONAL - 202-476-5086  
*June Amling, CWON, Heather Lee, WOCN*  
GEORGE WASHINGTON UNIV- 202-715-4325  
*Kathleen Kerntke, CWOCN, Jacqueline Rufo, CWOCN*  
MEDSTAR GEORGETOWN UNIV - 202-444-2801  
*Page WOCNs Elizabeth Keller, Kimberly Mauck, Anne McArdle*  
HOWARD UNIVERSITY - 202-865-6100 ext. 1105  
*Ann Cole, RN*  
NATIONAL REHABILITATION - 202-877-1186  
*WOCNs: Carolyn Sorensen, part time: Carolyn Corazza, Carolyn D'Avis. Send mailings c/o: STE G084*  
SIBLEY MEMORIAL - 202-689-9931  
*WOCNs: Dorothy Shi & Barbara Kebodeaux*  
BRIDGEPOINT HOSPITAL CAPITOL HILL (formerly Capitol Hill Hospital) is a nursing home with long term acute care beds.  
*Wound Care Dept. 202-546-5700, ext. 2140*  
UNITED MEDICAL CENTER (UMC) – 202-574-6150  
*Donna Johnson, WOCN*  
MEDSTAR WASHINGTON HOSPITAL CTR – 202-877-7103  
*Page WOCNs: Maura Fitzpatrick, Simcha Gratz, Hilary Hancock, Michelle Radawiec & Beverly Styles – 202-877-5395*

## OUTPATIENT OSTOMY CLINICS

**REMINDER: A doctor's referral is required to take with you or to be faxed to the clinic before your visit. Be sure your referral covers additional visits with the nurse if that might be needed. This will help with your insurance coverage.**

Carroll County Hospital Wound Care Center  
410-871-6334

Frederick Memorial Hospital Wound Care Center  
400 West Seventh St., 240-566-3840

• Holy Cross Hospital  
*Temporarily there is no Outpatient Clinic*

Adventist Healthcare White Oak Wound Clinic  
240-637-5908

Shady Grove Adventist Wound Center  
9901 Medical Center Dr  
Rockville, MD 20850  
Tuesday and Wednesday  
By Appointment Only - Call 240-826-6106

George Washington University Hospital - Main Level  
Monday thru Friday, 8:00 a.m.-4:00 p.m.  
By Appointment Only - Call 202-715-5065 or 5081

Medstar Georgetown University Hospital  
Thursday mornings, 8:30 AM to 12:30 PM.  
4<sup>th</sup> floor, Pasquerilla Healthcare Center  
For appointment, call 202-444-5365.  
\*\* Anne E. McArdle, NP, WOCN is able to write orders.  
A patient does NOT need an MD RX order to go to this clinic. But for insurance coverage contact your insurance company

Medstar Washington Hospital Center  
Surgical Clinic/Ostomy Care,  
Ground. Level, Rm GA48  
Wednesdays, 12:30 PM to 4:30 PM  
By Appointment Only - Call 202-877-7103

Every ostomate has different needs. Metro Maryland does not necessarily endorse all the information herein and this newsletter should not be used as a substitute for consulting your own physician or your WOCNurse for advice.

**THE MID-ATLANTIC'S LARGEST OSTOMY DEALER**

We have a dedicated group of Ostomy Supply Service Professionals that are committed to keeping you in your active lifestyle. Northern Pharmacy and Medical Equipment has an attentive staff that cares about your quality of life. Make us your first step in getting back to life as it was meant to be. After all .....

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**Supporter Information with Donation to Metro Maryland Ostomy Association**

Today's Date \_\_\_\_\_

Name \_\_\_\_\_ Birth Date \_\_\_\_\_

Street Address \_\_\_\_\_ Occupation \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Spouse Name \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_ Email \_\_\_\_\_

Type of Ostomy: Colostomy \_\_\_ Ileostomy \_\_\_ Urostomy \_\_\_ J-Pouch/Pull-thru \_\_\_

Continent Ileostomy \_\_\_ Continent Urostomy \_\_\_ Urinary Diversion \_\_\_ Other \_\_\_\_\_

Date of Surgery \_\_\_\_\_

Reason for Surgery: Crohn's \_\_\_ Ulcerative Colitis \_\_\_ Cancer \_\_\_ Birth defect \_\_\_ Other \_\_\_\_\_

We have no membership dues. We do remind you to donate whatever amount you wish. You may donate any time of year! All Donations are gratefully accepted and are Tax-Deductible.

Send Check to: Metro Maryland Ostomy Association  
 15800 Crabbs Branch Way, Ste. 300, Rockville, MD 20855  
[www.marylandostomy.org](http://www.marylandostomy.org) Telephone: 301-946-6661

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*Note our New Address*