



MedStar Health

# **Betty Lou Ourisman** **Breast Health Center**

MedStar Georgetown University Hospital Patient booklet.

**We're here for you: a note from your care team.**

Dear Patient,

We know that receiving a breast cancer diagnosis is overwhelming, and we want you to know that you are not alone during this journey. At the Betty Lou Ourisman Breast Health Center at MedStar Georgetown University Hospital, we are here to offer you compassionate care, expert guidance, and reliable support every step of the way.

We are committed to providing you with the highest level of care tailored to meet your individual needs. Our dedicated team of breast surgeons, oncologists, radiologists, and support personnel are more than medical professionals – we are your healthcare partners. And together, we will create a personalized care plan that focuses on both your physical health and emotional well-being. From diagnosis to treatment to recovery, we will be by your side.

We believe in the power of hope and healing; and we see the strength that you carry within. As you read this booklet, please remember that you are at the center of everything we do, and we are honored to be part of your care.

To help you stay connected with your care, we encourage you to sign up for the myMedStar Patient Portal. This secure online tool lets you access your test results, schedule and manage appointments, request prescription refills, and send messages to your MedStar Health care team. By using the portal, you can stay informed and involved in your healthcare journey with ease. Scan the QR code below to set up your account today.

With heartfelt support,

Betty Lou Ourisman Breast Health Center Team  
MedStar Georgetown University Hospital



Our Clinic



myMedStar  
Patient Portal

*We are deeply grateful to Marta and Tony Buzzelli for their generous support of the Betty Lou Ourisman Breast Health Center. Their gift empowers us to continue educating and caring for patients and their families. Thank you for making a difference!*

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## Meet your dedicated **surgical team.**

### Breast surgeons

Our breast surgical oncologists guide you through every phase of your treatment path. Specialty-trained and board-certified, they discuss your diagnosis with you and develop a personalized surgical plan. During surgery, they skillfully remove the cancer and, if necessary, sample the lymph nodes. Their collaboration with other experienced professionals ensures you receive the best possible comprehensive care.

### Nurse practitioners

Our nurse practitioners work closely with you and your care team. They help coordinate your treatment plan, order necessary medications and tests, and perform certain procedures. Acting as a bridge between you and your doctors, they ensure you have all the information and support you need.

### Nurse navigators

Think of our nurse navigators as you and your family's personal guides through the healthcare system. They provide clear, understandable education about your diagnosis and treatment process while offering emotional support and advocacy. They are available to answer your questions and help you feel informed and confident.

### Oncology social workers

Our compassionate oncology social workers are here to support you and your family as you manage the impact of a breast cancer diagnosis. They provide short-term counseling to help you cope with the emotional and practical challenges of illness and treatment. In addition, they can connect you with support groups, specialized programs, and community resources—ensuring you have the guidance and support you need every step of the way.

### Executive assistants

Our executive assistants are your go-to for getting in touch with your healthcare team, scheduling office visits and surgeries, and handling reports. They manage these logistics so you can focus on what matters most – your health and well-being.

### Certified medical assistants

Our medical assistants provide support in the clinical setting. They aid with documenting medical histories, obtaining medical records, and assisting during procedures – ensuring your appointments run smoothly and efficiently.

## Explore breast cancer **treatment options.**

Breast cancer is staged using the TNM system, which stands for the size of the tumor (T), the presence of cancer cells in the lymph nodes (N), and metastasis or spread of cancer cells to other organs (M). This standardized method for describing how far cancer has spread is important when choosing treatments and ensuring personalized care.

### Treatments overview

Breast cancer treatment options include surgery, chemotherapy, radiation therapy, and hormonal therapy. Each patient's care plan is unique, potentially including one or more of these methods. Additionally, surgical choices range from removing the entire breast (mastectomy) to part of it (lumpectomy) and may include lymph node surgery. Reconstruction surgery is also a possibility.

After surgery, additional treatments like radiation, chemotherapy, or hormone therapy may be necessary. These options depend on the surgery type and tumor characteristics. Also, we thoroughly test the removed tissue for biomarkers – genes or proteins that may signal the presence of cancers. A related pathology report guides the next steps in treatment planning.

In some cases, medications may be given before surgery (neoadjuvant treatment) to shrink the tumor or after surgery (adjuvant treatment) to prevent the cancer from returning. The decision to use chemotherapy or hormonal therapy depends on various factors: the size and type of the tumor, lymph node impact, and specific tumor tests.

## Understand **genetic testing.**

### What is genetic testing?

Genetic testing analyzes your DNA to identify changes in specific genes that could increase your risk of developing breast or other cancers.

### Why is genetic testing important?

It helps determine if you have inherited genetic mutations, like BRCA1 or BRCA2, which are linked to a higher risk of breast and ovarian cancers. These results can guide your treatment options and help your family understand their own risks.

### What are the potential outcomes of genetic testing?

- **Positive results:** This means a mutation was found, which could increase your cancer risk. This information can guide treatment choices, such as preventive surgeries or specific therapies.
- **Negative results:** No mutations were found. While this is reassuring, it doesn't eliminate your cancer risk entirely, as other factors may also play a role.
- **Variant of uncertain significance (VUS):** This indicates a gene change that we don't fully understand yet. The significance might become clearer with more research over time.

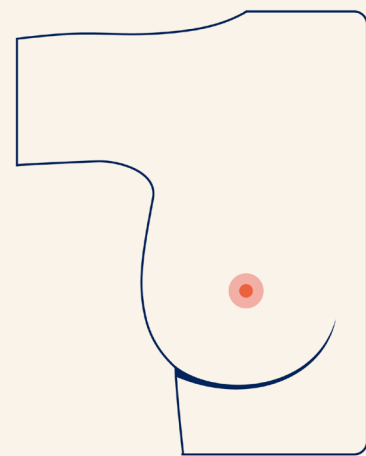
### What are the benefits of genetic testing?

- **Personalized treatment:** Knowing about specific mutations allows for treatments tailored to your needs, including potential participation in clinical trials.
- **Family planning:** If you carry a mutation, your family members might also be at risk. They can take preventive measures based on this information.
- **Proactive management:** A positive result may lead to preventive surgeries or other early interventions to reduce your cancer risk.

# Surgeries.

## Lumpectomy

A lumpectomy, also known as breast-conserving surgery, involves removing the tumor. We carefully make an incision and remove the cancer and surrounding tissue. A second incision in the armpit allows us to remove the sentinel or axillary nodes. We perform this surgery using general or local anesthesia.



## Clear margins defined

During surgery, the goal is to remove the entire tumor, which means taking out as little as possible of the normal breast tissue around it. That surrounding area is the "margins." After surgery, a pathologist will check if the margins are clear of cancer cells. If some are found near the edges, another surgery might be needed to ensure complete removal.

## Localization procedures

During a biopsy, we place a tiny clip in the breast to mark the exact location of the tumor. Before surgery, we insert another small marker, called a Magseed®, next to the original clip to help accurately locate the cancerous area. This procedure is performed days or weeks before the surgery. With the area numbed with local anesthesia, we insert the Magseed® using a special needle, wire, and guided imaging (ultrasound or mammography) to precisely navigate surgeons to the exact treatment site.

## Mastectomies

### Nipple-sparing mastectomy

This procedure removes the entire breast mound but preserves the nipple area and skin. It's suitable for some patients depending on breast size, tumor size, and tumor location. The goal is to prepare for reconstruction. After this type of mastectomy, the nipple won't function the same, and its sensation may be lost.

### Skin-sparing mastectomy

This procedure removes the entire nipple area, minimal breast skin, and the breast mound. The goal is to prepare for reconstruction by a skilled plastic surgeon.

### Simple mastectomy

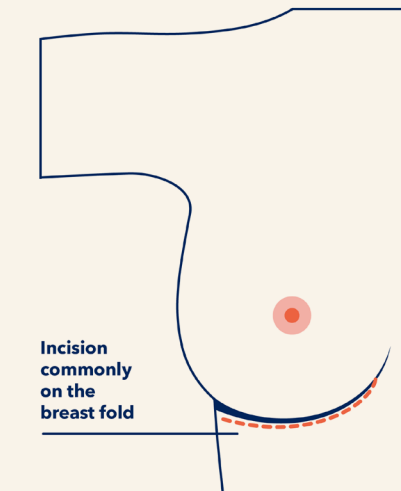
This procedure removes the entire nipple area, some breast skin, and the breast mound. It does not require the removal of muscles or lymph nodes in the armpit (axilla). The goal is to leave the incision as flat as possible. Sometimes, lymph nodes within breast tissue that extend into the armpit may be removed. The operation is done with general anesthesia and takes about an hour.

## Nipple and skin sparing mastectomies

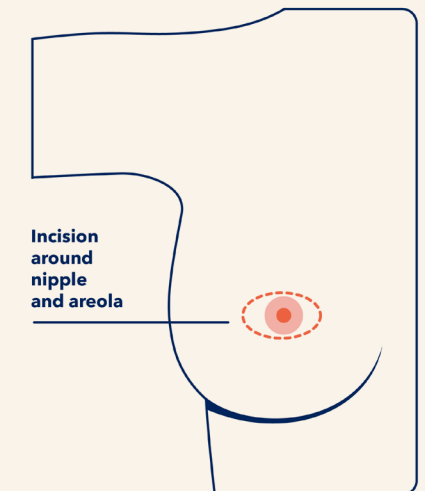
### Modified radical mastectomy

This procedure removes the breast, including the nipple area, specific skin, and the axillary (armpit) lymph nodes – muscles are not removed. The operation is done with general anesthesia and takes about two hours.

**Nipple sparing incision saves the nipple**  
Inframammary



**Skin sparing incision saves the skin, not the nipple**  
Elliptical periareolar



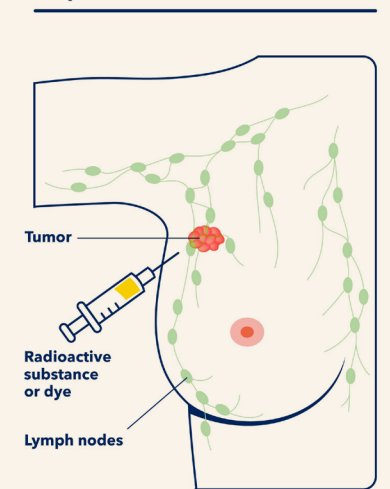
## Sentinel lymph node biopsy and mapping

The sentinel lymph node is the first node in the armpit that drains the tumor. Sentinel node mapping (SNM) identifies and removes this node for a pathologist to examine. During surgery, you receive an injection to help locate the sentinel node. This can be a magnetic-oxide injection, a nuclear injection, or a blue dye. This helps us accurately assess the lymph nodes and may reduce the number we need to remove – lowering the risk of complications like lymphedema and limited movement.

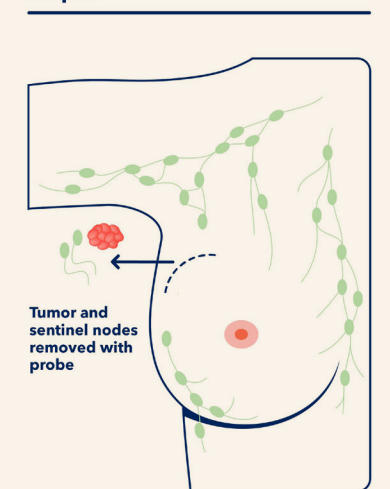
If the sentinel node is not located, we decide the next steps based on your tumor type and surgeon's experienced judgment. You may notice blue staining of your skin and in your urine for 24-48 hours depending on the color of the dyed injection. This treatment also affects your first bowel movement after surgery. In addition to the rare chances of allergic reactions, other risks include infections and bleeding.

We aim to protect the nerves in the armpit that control muscle movement and skin sensation. You might feel some numbness, but it shouldn't affect your muscle function or arm movement. Moreover, removing lymph nodes comes with a lifetime small risk of lymphedema.

### Step A



### Step B





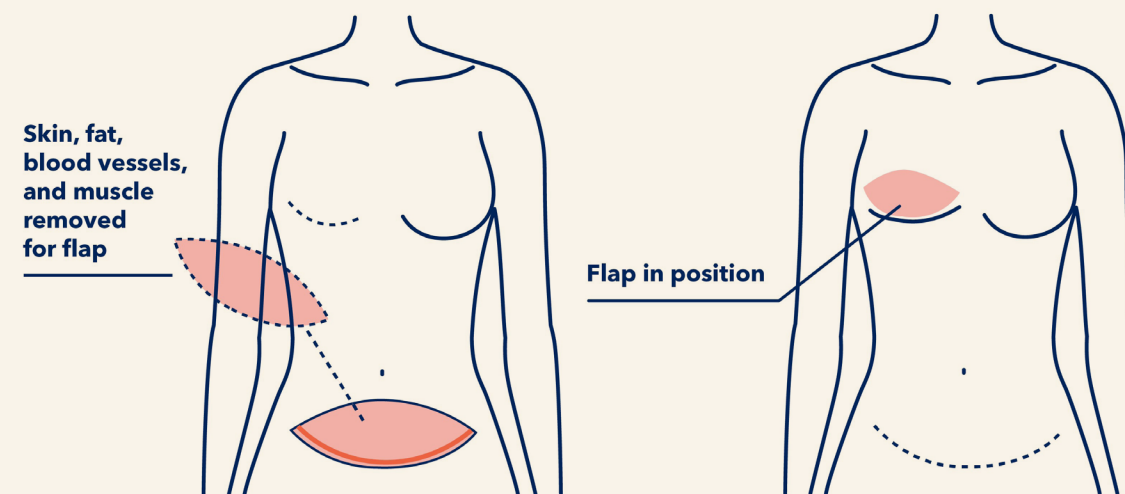
## Surgeries. continued

### Lymphatic microsurgical preventative healing approach (LYMPHA)

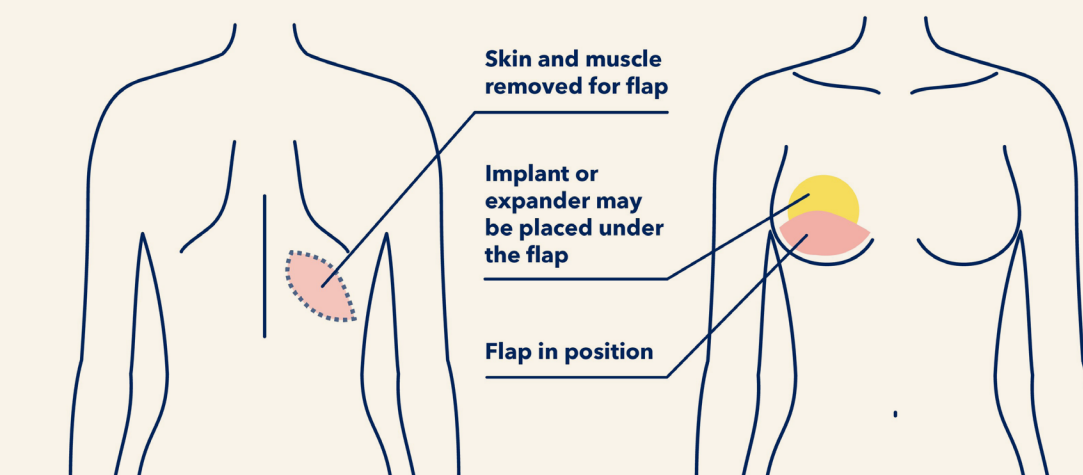
We provide lymphovenous bypass (LVB) to help manage lymphedema after removing 10-20 lymph nodes from the armpit area. This procedure connects lymphatic vessels to nearby veins - allowing lymph fluid to bypass blocked or damaged areas. This procedure can reduce swelling, improve circulation, and lessen discomfort associated with lymphedema.

### Reconstruction

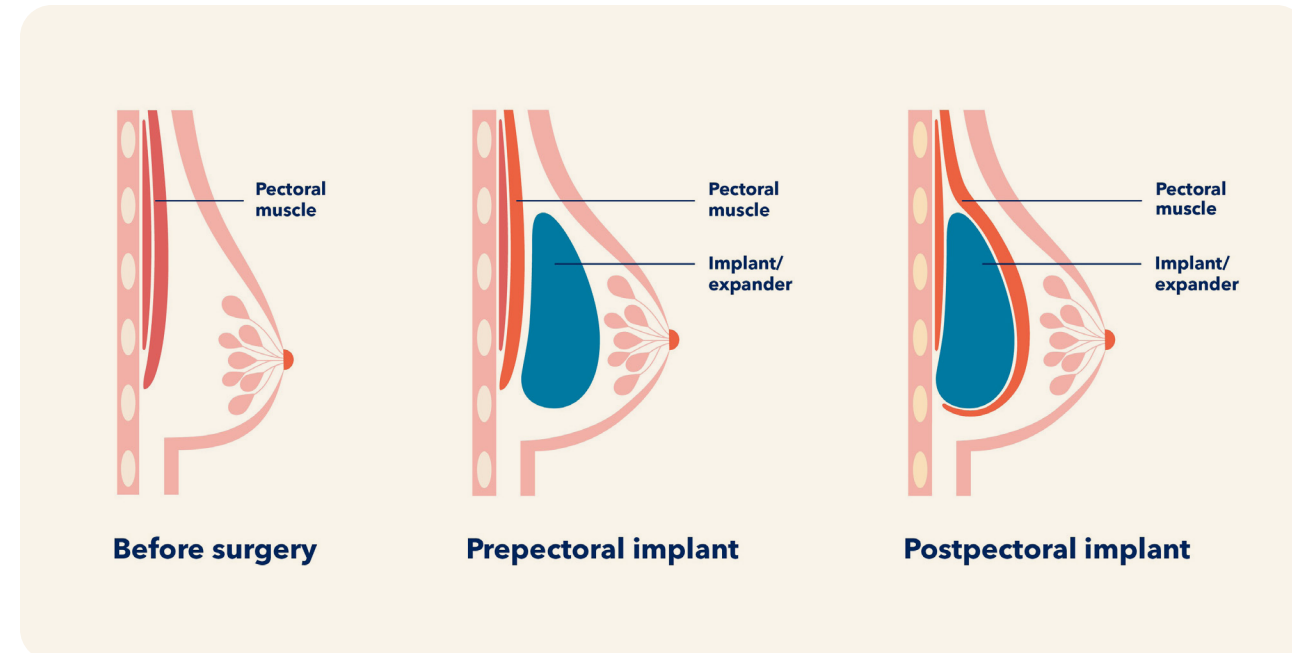
There are multiple options for breast reconstruction. Most patients can have it performed right after their mastectomies or later. From choosing artificial implants to using your own tissue, we discuss options that best fit your healing goals.



### DIEP (deep inferior epigastric perforator) flap



### LAT (latissimus dorsi) flap



### Tissue expander or implant

### Reconstruction

During a mastectomy, nerves are often severed, leading to numbness in the affected areas. Resensation restores feeling by reconnecting the severed nerves using tissue transplanted from one person to another. This procedure can be performed during the initial breast reconstruction surgery or at a later date.

### Post-operative appointment

It occurs about two weeks after surgery. During this visit, your surgeon carefully reviews your pathology report, assesses your wound, and discusses the next treatment step. If you have drains, they will be removed when the amount of released fluid has sufficiently decreased.

If an axillary lymph node surgery is necessary to remove 10-25 lymph nodes, your surgeon will insert a drain and typically remove it during your post-operative appointment. At this appointment, a nurse navigator will assist in coordinating any necessary follow-up with medical and radiation oncology.

Potential risks for all of these surgical procedures include infections, bleeding, delayed wound healing, anesthetic complications, heart arrhythmias, pulmonary difficulties, skin necrosis, postoperative fluid accumulation, and medication reactions.

## Therapies.

### Radiation therapy

We often use pain-free radiation therapy after a lumpectomy to target and destroy any remaining cancer cells. Treatment sessions usually last a few minutes and occur over three to five weeks. Common side effects include tiredness and skin changes such as redness and sunburn-like irritation. Some patients may receive radiation during surgery or be referred to a radiation oncologist for treatment.

### Systemic therapy

It includes treatments such as chemotherapy or hormonal therapy. This type of therapy can be combined with local treatments like surgery and radiation. The choice to use chemotherapy depends on various factors: time and size of tumor, lymph node status, and other test results. We will refer you to a medical oncologist for further advice if needed.

### Hormonal therapy

Hormonal therapy, like Tamoxifen, can help slow down or stop the growth of certain cancer cells. If your tumor is estrogen receptor-positive (ER+), your doctor might suggest this treatment. Typically, you should start taking a daily pill a few weeks after surgery and continue for five to ten years. While this treatment can be effective, it does come with some risks, especially for women ages 50+. These risks include a small chance of developing endometrial cancer (2%), blood clots, strokes, and cataracts. Common side effects also include hot flashes and vaginal discharge.

### Lymphedema management

Lymphedema happens when lymph fluid builds up in your body. It can occur months or even years after surgical or radiation treatments that involved the removal of lymph nodes. If you feel heaviness or fullness in your arm, tell your doctor right away. To lower your risk, wear gloves when gardening and avoid infections in your cuticles and fingers.

### SOZO screenings

We offer the SOZO machine, a noninvasive tool that uses Bioimpedance Spectroscopy (BIS) to send a safe and painless electrical current through your body in just 30 seconds. For breast cancer patients, this device helps detect fluid changes before swelling starts, which allows for early treatment to prevent lymphedema. SOZO also helps monitor your progress in therapy and tracks changes in your body composition to ensure you receive the best possible comprehensive care.

### Physical therapy

After surgery, you might notice that the area around the incision feels different, and your arm could feel numb or tingly. It might also feel tight when you try to stretch. These feelings are temporary and will get better with exercise and stretching. Doing arm raises, lifts, reaches, and swings can help you move your arm more easily. Using your surgical arm in your daily activities will help it get stronger and more flexible over time. If you find the exercises difficult, physical therapy can support your recovery.

## Get ready for **your surgery.**

### Prepare for your surgery

Discuss pre-surgery tests and/or surgery clearances during your visit.

(If you receive care from a cardiologist and haven't visited them in the past six months, please schedule an appointment. For non-MedStar Health cardiologists, have them fax the results to 202-444-4208.)

- ☐ Expect an email or text with a link to complete your anesthesia history.
- ☐ Consult with your doctor about when to stop and restart blood thinners (e.g., Plavix, aspirin, Warfarin, Lovenox, Xarelto, etc.) to reduce bleeding risks.
- ☐ Stop taking Tamoxifen at least one week before surgery to lower clotting risks.
- ☐ Stop taking all medications that increase bleeding two weeks before surgery and restart them two weeks afterwards or as advised by your doctor.
- ☐ Ask your doctor about the correct fasting dosage for your diabetes medication.
- ☐ Avoid all nicotine products – e-cigarettes, cigarettes, vaping, cigars, nicotine gum, patches, and alternatives – at least four weeks before and six weeks after surgery. (Nicotine can slow wound healing or cause the delay/cancellation of your surgery. Talk with your primary care physician if you need help quitting.)
- ☐ Review the Guide for Breast Reconstruction if applicable and direct any related questions to your plastic surgery team.
- ☐ Submit any paperwork related to work-absence requests during your visit or via the patient portal.

### Navigate your surgery day

- ☐ Look for a confirmation letter with detailed instructions once your surgery date is set.
- ☐ Arrive two hours before your scheduled surgery time.
- ☐ Take your daily blood pressure or cholesterol medications at the regular time with a small sip of water before surgery.
- ☐ Wear loose and comfortable clothes that are easy to change.
- ☐ Leave valuable items and cash at home.
- ☐ Remove all jewelry – including wedding rings and body piercings – to prevent burns.
- ☐ Do not wear contact lenses, hairpieces, or hairpins.
- ☐ Discuss all concerns with your surgical team.
- ☐ Inform your anesthesiologist if you're prone to nausea or vomiting so they can take preventative steps.

### Support post-surgery healing

If you are having one of the below procedures, we will discharge you from our Post-Anesthesia Care Unit (PACU). A caring friend or family member, 18 years of age or older, must be at the hospital to receive your discharge instructions, take you home, and stay with you for the first 24 hours to ensure your comfort and safety.

- Lumpectomy and total mastectomy (without reconstruction)
- Oncoplastic reconstruction or revision reconstruction
- Immediate implant or tissue expander reconstruction

For patients who have flap-based reconstruction surgeries, please plan for a hospital stay of one to two days.

# Follow **post-discharge guidelines.**

## Post-lumpectomy discharge instructions

### Activities

- ☐ Start walking as much as you comfortably can as soon as possible.
- ☐ Avoid intense cardiovascular activities for the first two weeks.
- ☐ Begin range-of-motion exercises after your post-operative clinic visit.
- ☐ Return to full activities in four weeks.
- ☐ Avoid driving while taking opioid pain medications.

### Restrictions

- ☐ Avoid lifting heavy objects (greater than 10 lbs.) for four weeks.
- ☐ Avoid smoking or using nicotine products – vaping, nicotine patches, nicotine lozenges, secondhand smoke, etc. – for six weeks after surgery.
- ☐ Avoid swimming or baths for four weeks, but showers are allowed after 24 hours.
- ☐ Avoid vigorous rubbing or scrubbing of the surgical area.
- ☐ Use only gentle, non-fragranced soaps to wash the surgical area.
- ☐ Avoid using deodorant until after your post-operative appointment or as directed by your surgeon if you have a surgical incision in the armpit.

### Surgical area care

- ☐ Wear a surgical bra for one to two weeks.
- ☐ Remove gauze or wound dressing after 48 hours, and reapplication is not necessary.

- ☐ Leave sterile strips in place; and reapplication is not necessary if they fall off.
- ☐ Shower after 24-48 hours.
- ☐ Reduce swelling during the first 48-72 hours by applying ice to the area for 20 minutes and then resting for 20 minutes.

## Post-total mastectomy discharge instructions

### Activities

- ☐ Start walking as much as you comfortably can as soon as possible.
- ☐ Avoid intense cardiovascular activities for the first two weeks.
- ☐ Begin range-of-motion exercises after your post-operative clinic visit.
- ☐ Return to full activities in four weeks.
- ☐ Avoid driving while taking opioid pain medications.

### Restrictions

- ☐ Avoid lifting heavy objects (greater than 10 lbs.) for six weeks.
- ☐ Avoid placing objects on your chest or sleeping on your sides.
- ☐ Avoid swimming or baths for four weeks, but showers are allowed after 24 hours.
- ☐ Avoid smoking or using any nicotine products.
- ☐ Avoid using ice or heating pads on the surgical area or chest.

## Surgical area care

- ☐ Wear a surgical bra at all times for four weeks, except when showering.
- ☐ Allow bandages and skin glue to fall off naturally, and do not pick at them.
- ☐ Use gentle, non-fragranced soaps to wash the surgical incision area, and gently pat dry.
- ☐ Avoid applying ointments, creams, or lotions to the surgical areas until seen in the clinic.
- ☐ Avoid using deodorant for four weeks if the surgical incision is in the armpit or until seen in the clinic.
- ☐ Perform drain care by emptying it twice a day or when half full, whichever comes first; and recording the fluid amount.
- ☐ Keep compression bandage on for three days if applicable.

## Post-expander and implant reconstruction discharge instructions

### Activities

- ☐ Walk as much as you can comfortably as soon as possible.
- ☐ Avoid intense cardiovascular activities for the first two weeks.
- ☐ Avoid physical trauma (including sexual activity) for four to six weeks.
- ☐ Return to light-duty activities within two weeks, and resume driving if comfortable.
- ☐ Return to full/normal activities within four to six weeks.

## Restrictions

- ☐ Avoid lifting heavy objects (greater than 10 lbs.) for six weeks.
- ☐ Avoid placing objects on your chest or sleeping on your sides.
- ☐ Avoid swimming or baths for four weeks, but showers are allowed after 24 hours.
- ☐ Avoid smoking or using any nicotine products.
- ☐ Avoid using ice or heating pads on the surgical area or chest.

## Surgical area care

- ☐ Wear a surgical bra at all times for six weeks, except when showering.
- ☐ Allow bandages and skin glue to fall off naturally, and do not pick at them.
- ☐ Use gentle, non-fragranced soaps to wash the surgical area, and gently pat dry.
- ☐ Avoid applying ointments, creams, or lotions to the surgical area until seen in the clinic.
- ☐ Avoid using deodorant for two weeks if the surgical incision is in the armpit or until seen in clinic.
- ☐ Avoid wearing an underwire bra for six weeks.
- ☐ Perform drain care by emptying it twice a day or when half full, whichever comes first, and recording the fluid amount.
- ☐ Contact your plastic surgery team for any reconstruction-related questions or concerns.
- ☐ Refer to the Guide to Reconstruction for detailed instructions and contact information for your plastic surgery team.



# Learn about clinical trials.

## What is a clinical trial?

It's a scientific study where volunteers safely and effectively explore new procedures, medications, or devices. These studies bring hope with the potential to improve the lives of millions around the world - both now and in the future.

## Why do we need clinical trials?

Clinical trials are required before the Food and Drug Administration (FDA) approves new treatments. Each new drug or device must show it is safe and helpful for people. Our MedStar Health Research Institute conducts these types of clinical trials.

## Who can participate in clinical trials?

Both people with medical conditions and healthy volunteers can join clinical trials. Each study has specific requirements like age and medical history, which are reviewed by principal investigators.

## Who oversees clinical trials?

A medical doctor usually leads these studies. Before volunteers can join, Institutional Review Boards (IRB) must approve the trials. Comprised of healthcare experts, these boards continuously monitor the studies to protect patients' rights and volunteers' safety.

## What is informed consent?

The IRB reviews and approves informed consent while providing clear details about the studies. This process helps volunteers make well-informed decisions. Volunteers also are encouraged to ask questions and take their time before signing the consent form so they feel comfortable and confident about their choices.

## What are the benefits of being in a clinical trial?

Although there are no guarantees, participating in clinical trials can offer multiple potential benefits:

- The chance to try new treatments that could improve your conditions.
- The careful monitoring and management of your health by study teams.
- The opportunity to contribute to medical research - helping both current and future generations.

For more information about clinical trials or to view open trials at MedStar Health, Georgetown Lombardi Comprehensive Cancer Center, and other institutions, please visit: **Lombardi.Georgetown.Edu/Research/ClinicalTrials** or call National Cancer Institute **888-624-1937** or **BreastCancerTrials.org**.

# Find support for you and your family.

We understand the emotional and practical challenges that come with a cancer diagnosis. We are here to support all patients and families treated at the Betty Lou Ourisman Breast Health Center or Georgetown Lombardi Comprehensive Cancer Center.

## Psychosocial services

Our dedicated oncology social workers help design personalized strategies to help you manage distress, anxiety, and depression. We also connect you with community resources and support programs as well as assist with the management of practical aspects of your cancer diagnosis. .... **202-444-8091**

## Nutritional counseling

Our registered dietitians are here to support you at any stage of your diagnosis and treatment. Whether it's nutrition for disease prevention, symptom management during treatments, or modified diets, we aim to provide effective guidance. .... **202-444-2958**

## Pastoral care

Our chaplains offer spiritual and emotional support to patients and families of all faiths. Services include counseling, prayer, meditation, support groups, sacraments, and ethical decision-making. .... **202-444-3030**

## Acupuncture

Acupuncture can help breast cancer patients by relieving some of the side effects of cancer and its treatments. It may help reduce: pain, fatigue, anxiety, and stress. It works by stimulating specific points on the body to help regulate the nervous system and improve blood flow, which may promote healing and balance. It's used as a complementary therapy alongside medical treatments, not a replacement ... **202-741-1250**

## Physical medicine and rehab

Physical medicine and rehabilitation (PM&R) drives your path to recovery after breast surgery. Whether you have undergone a lumpectomy, mastectomy, or reconstructive procedures, our PM&R specialists help you regain your strength, mobility, and function all while easing pain and swelling. With personalized therapies - such as targeted exercise, posture training, and lymphedema management - rehabilitation not only supports a smoother recovery but also helps you restore your quality of life ..... **202-829-2632**



## Find support for **you and your family.** continued

### Support groups and programs

#### Smith Center for Healing and the Arts

Explore numerous programs for patients and caregivers at this D.C.-based organization, which offers general and Black-women breast cancer support groups. **SmithCenter.org**

#### Cancer Support Community

Access free support groups, patient navigation assistance, counseling, and more through this national and local organization.

**CancerSupportCommunity.org/Location/CSC-Washington-DC**

#### Hope Connections for Cancer Support

Participate in several programs, including a bi-monthly support group for breast cancer patients, offered by this Maryland-based organization.

**HopeConnectionsForCancer.org**

#### Look Good Feel Better

Improve your body image and address appearance-related side effects of cancer treatments at this free online program.

**LookGoodFeelBetter.org**

### Finances and work

#### Triage Cancer

Learn about the practical and legal issues following a cancer diagnosis through free education. **TriageCancer.org**

#### Cancer and Careers

Receive free education on managing the intersection of cancer and work.

**CancerAndCareers.org**

### Information and peer mentors

#### Living Beyond Breast Cancer

Connect with trusted information and support through this national non-profit while benefiting from a peer mentoring help line. **lbbc.org**

#### Imerman Angels

Receive free and personalized one-on-one cancer support for patients and caregivers through this national program.

**ImermanAngels.org**

#### Young Survival Coalition

Access support groups, information, and peer mentors for people ages 40 and younger diagnosed with breast cancer.

**YoungSurvival.org**

### Wellness and exercise

#### Unite for HER

Join a collaborative oncology program that provides free and supportive therapies, including nutrition, meditation, exercise, and informational webinars. **UniteForHer.org**

#### 2 Unstoppable

Access online exercise programs, classes, and oncology fitness resources through this non-profit. **2Unstoppable.org**

### Families with children

#### Bright Spot Network

Support parents who have young children by participating in groups and webinars while accessing resources tailored for children. **BrightSpotNetwork.org**

#### Cancer Support Community's What do I tell the Kids

Find helpful information to support children through cancer diagnoses. **Bit.ly/3Srd9ml**

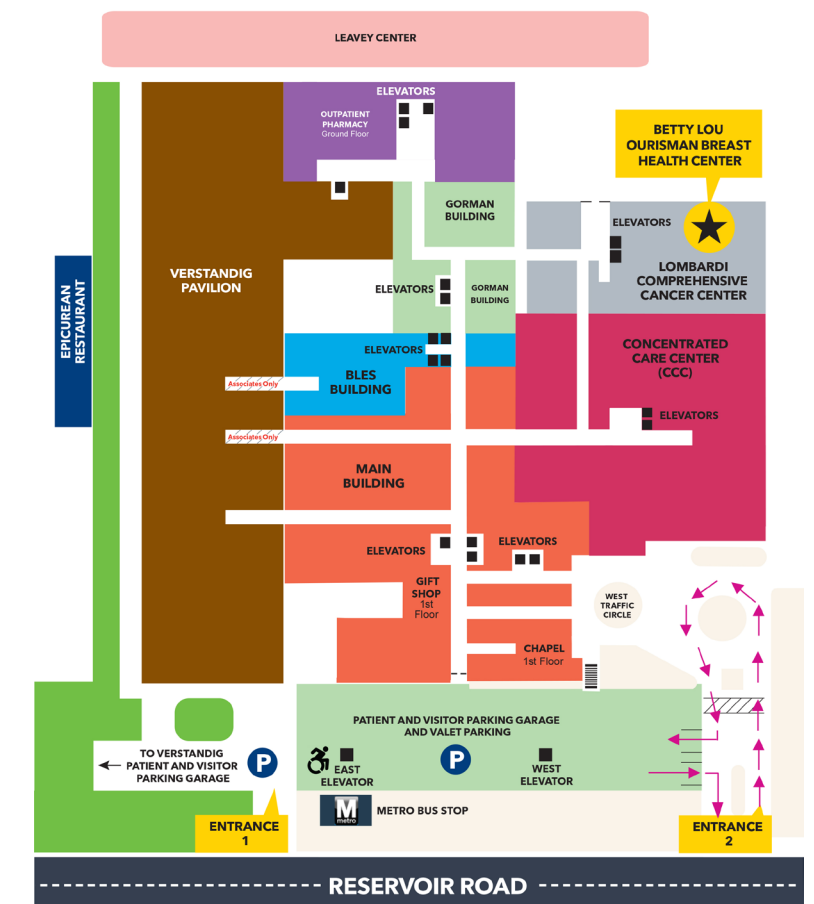
### Survivorship program

At the Betty Lou Ourisman Breast Health Center, our breast cancer survivorship program is an invaluable resource for navigating life after treatment. We offer compassionate support to address the unique physical, emotional, and practical challenges that survivors may encounter. By providing a compassionate environment, we also ensure continuity of care and empower survivors with the knowledge and tools needed to thrive in their new normal.

**202-444-7042**

## Navigate our campus with ease.

To make your experience as smooth and stress-free as possible, we've included this detailed campus map to help you easily find your way around.



Additional important phone numbers.

For your convenience, below is a comprehensive list of contact numbers for additional support and services provided at MedStar Health to ensure you receive the assistance and care you need.

|                                                          |              |
|----------------------------------------------------------|--------------|
| Breast Health .....                                      | 202-444-3315 |
| Genetics .....                                           | 202-444-0023 |
| Imaging (MedStar Georgetown University Hospital)         |              |
| • MRI .....                                              | 202-295-0542 |
| • Mammogram and Ultrasound .....                         | 202-295-0541 |
| • Biopsy Coordinator .....                               | 202-444-7565 |
| Imaging (MedStar Radiology Network at Lafayette) .....   | 202-748-8830 |
| Imaging (MedStar Radiology Network at Chevy Chase) ..... | 301-841-8300 |
| Medical Oncology .....                                   | 202-444-2223 |
| Nutrition .....                                          | 202-444-2958 |
| Pastoral Care .....                                      | 202-444-3030 |
| Physical Medicine and Rehabilitation .....               | 202-877-1621 |
| Plastic Surgery .....                                    | 202-444-8751 |
| Radiation Oncology .....                                 | 202-444-3320 |
| Social Work .....                                        | 202-444-8091 |

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