

# Life & Health

EXCELLENCE IN COMMUNITY HEALTH • WINTER 2011

## Health Link



**DE-BAG IT** When you eat food directly out of a bag or box, you're more likely to keep chomping until the entire contents are gone. Instead of mindless munching, pour one serving into a bowl.

*American Dietetic Association*

**SIT-UP SAVVY** Doing sit-ups every morning sounds like a good idea, but you shouldn't train abdominal muscles every day. Like other muscles, they need a day of recovery between each workout.

*American Council on Exercise*



**IT'S BEST TO QUIT** Evidence now confirms that people who smoke cigarettes are at an increased risk of getting colorectal cancer—along with a host of other cancers. For help quitting, you can call 800-QUIT-NOW (800-784-8669).

*American Association for Cancer Research*

## WHY WEIGHT? Act quickly on unwanted pounds

Stepping onto your bathroom scale and discovering that you've gained 5 pounds can leave you feeling discouraged. But not nearly as discouraged as you'd be if the scale showed you were 10 pounds heavier—and now facing twice the effort to get the weight off.

There's a lesson to be learned here: When pounds start creeping up, you don't want to let your guard down.

**WHAT CAN HAPPEN** Weight gain becomes more likely as you age. Metabolism slows and, often, you become less active. Those changes can spell trouble for your waistline.

But weight problems can be further compounded if you're not eating well. Just consuming 100 extra calories a day will cause you to gain a pound in a little more than a month. In three years' time, that could total nearly 30 extra pounds.

It's easier to take off 3 or 4 unwanted pounds as soon as they appear than it is to shed the 30 pounds they might become down the road. So it's smart to weigh yourself regularly and take action when the scale begins moving up.

Start by keeping track of what you eat and how much physical activity you get. According to the Centers for



Disease Control and Prevention, this can help you monitor your progress and spot trends.

For example, maybe you'll see that you tend to gain weight when life is busiest and you don't get regular exercise. Scheduling time for a daily walk or a trip to the gym could make a difference.

Likewise, if you find you're frequently eating fast food, you might decide to change your habits. Cutting calories and exercising are the best strategies for staying trim.

Even if you've already gained a lot of weight, you can try not to gain any more. Your health is worth the effort, and your effort is likely to reap rewards.

## A couple of measures worth taking

Are you at a normal weight? Two simple tests may answer that question.

The first involves a measurement of your waist.

Readings greater than 35 inches if you're a woman or 40 inches if you're a man put you at risk for weight-related health problems.

The second test determines your body mass index (BMI). This is a measurement of your weight in relation to your height. It's a fairly reliable indicator of body fat for most adults, although not necessarily for athletes and older people.

To calculate your BMI, visit [www.nhlbisupport.com/bmi](http://www.nhlbisupport.com/bmi).

BMI results are classified as follows:

- Below 18.5: Underweight.
- 18.5 to 24.9: Normal weight.
- 25.0 to 29.9: Overweight.
- 30.0 and above: Obese.

Sources: American Dietetic Association; National Institutes of Health

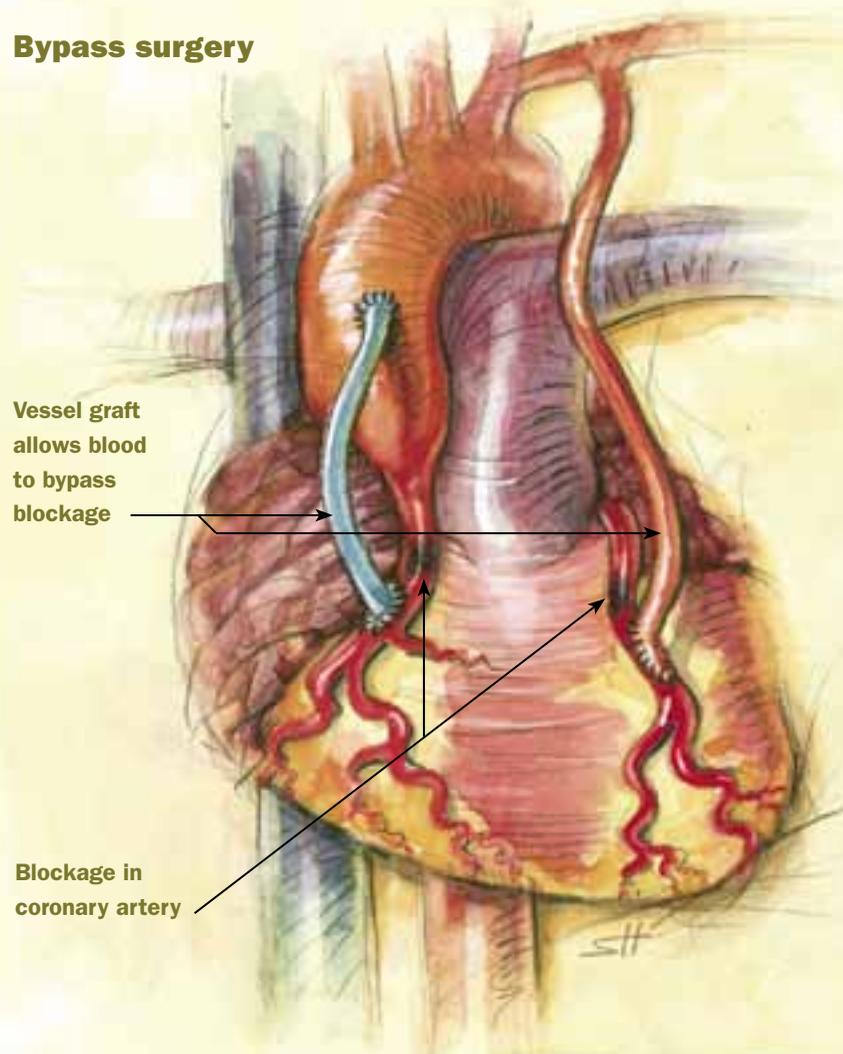
**For a listing of our health classes, see our calendar on page 8.**

## InSide

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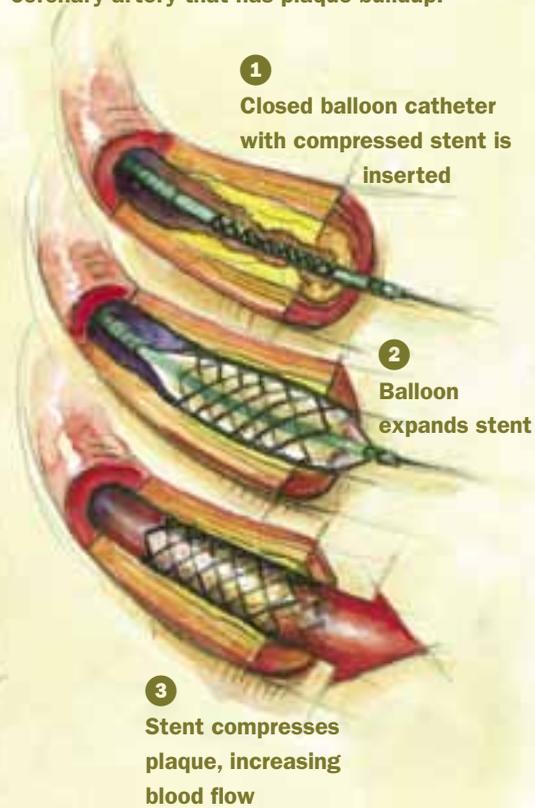
## Two common procedures used to repair blocked arteries

### Bypass surgery



### Angioplasty

This illustration shows a stent being placed in a coronary artery that has plaque buildup.



Coffey infographic with information from the National Institutes of Health

## What you can do for your heart

Medical treatment for coronary artery disease (CAD) is a good thing, no doubt. But your heart problems don't end with successful angioplasty or bypass surgery. You need to do your part to protect your heart.

It's possible that lifestyle choices you made before treatment contributed to your CAD. Now you should set your sights on making choices that will help keep your arteries clear.

Some of the following recommendations by the National Heart, Lung, and Blood Institute could be right for you:

- Learn to eat a healthy, low-fat diet.
- Make an effort to be physically active, preferably for 30 minutes a day on most days of the week.
- Quit smoking if you smoke.
- Lose weight if you're overweight.
- Look for ways to reduce stress.
- Take medicines as your doctor directs. Medications help control conditions—such as high blood cholesterol—that may have caused you to develop CAD in the first place.

You may find it easier to make changes if you participate in a cardiac rehabilitation program recommended by your doctor.

For heart health options, check out [www.chiphealth.org](http://www.chiphealth.org). Or attend one of our health classes—see the calendar on the back page.

# KEEP YOUR HEART RUNNING WELL

*Treatments for blocked arteries can restore blood flow and save your life*

**IF YOU WERE** a car, your heart would be the engine that keeps you running. But your car can't run if it doesn't have gas. And your heart can't beat without a steady flow of oxygen-rich blood.

Fortunately, mechanics can fix cars and doctors can help keep our hearts from stalling.

**BLOCKED ARTERIES** A common reason for reduced blood flow to the heart is atherosclerosis—the buildup of fatty deposits called plaque inside artery walls. Over time, hardened plaque can narrow the arteries, reducing or even stopping blood flow.

If atherosclerosis develops in arteries on the surface of the heart, it's called coronary artery disease (CAD)—the leading cause of death for men and women in the U.S.

If you have CAD, your doctor may recommend angioplasty or coronary artery bypass surgery to keep the blood flowing in your heart.

The right treatment for you depends on how severe your blockages are, where they're located and what other medical conditions you may have.

Angioplasty often is used when the artery is narrowed but not completely blocked and the blockage can be reached using a long, thin plastic tube called a catheter. The procedure can also be used during a heart attack to quickly open a blocked artery.

Bypass surgery could be recommended if you have severe heart disease or multiple arteries that are blocked or if you have diabetes or heart failure. In an emergency,

it can be performed during a heart attack.

**ABOUT ANGIOPLASTY** During angioplasty, a physician makes a small cut in your arm or upper thigh to insert a catheter with a deflated balloon at the tip.

The catheter is threaded through a blood vessel and into the artery in the heart until it reaches the blockage. The balloon is then inflated to push the plaque back against the artery wall.

**The right treatment for you depends on several things, including how severe your blockages are.**

Once the plaque is compressed, the balloon is removed. A small, wire mesh tube called a stent may be placed in the artery to help hold it open and to reduce the chance that the artery will become blocked again.

Angioplasty reduces angina (chest pain) and shortness of breath associated with CAD.

It can also minimize damage to the heart muscle from a heart attack and reduce the risk of death from heart disease in some patients.

A hospital stay of a day or two is normal, and recovery can take less than a week.

Though angioplasty is generally considered safe, side effects can include blood vessel bleeding, an irregular heartbeat, heart attack or kidney damage.

**ABOUT BYPASS SURGERY** Traditional bypass surgery requires cutting your breastbone open and stopping your heart while a heart-lung machine circulates your blood. After surgery is completed, the heart usually starts beating again on its own or mild electrical shocks may be used to restart it.

Sometimes a surgeon operates while the heart is still beating. This off-pump technique—so named because the technique doesn't require the use of the heart-lung machine—may reduce the risk for blood transfusions and kidney complications.

During either type of bypass surgery, a healthy artery or vein is removed from another part of the body and then connected—or grafted—to the blocked artery. This allows blood to flow through the bypass to the heart.

As many as five blocked major heart arteries can be bypassed during one surgery, according to the American Heart Association (AHA).

Traditional bypass surgery takes three to five hours to perform. You may need to recover in the hospital for up to a week and at home for up to 12 weeks or more. Risks include bleeding, reactions to anesthesia, fever, pain, stroke or a heart attack.

**LEARN MORE** You can learn more about both angioplasty and bypass surgery at these websites:

● AHA, [www.heart.org](http://www.heart.org).

● National Heart, Lung, and Blood Institute, [www.nhlbi.nih.gov](http://www.nhlbi.nih.gov).



## When seconds count

### Local man gives heartfelt thanks for lifesaving treatment

Mike never imagined he might have heart disease. After all, he wasn't that old. He dismissed the occasional shortness of breath or discomfort in his chest, thinking he was just a bit out of shape.

That changed one day last fall when he was riding a Jet Ski at the beach with his friend Jim. A wave slammed Mike in the chest, leaving him winded and in pain. After a short rest, he could tell something was wrong. He returned to the beach, where he collapsed.

**CHAIN OF LIFE** What happened next saved Mike's life. The quick responses that took place along what is called the chain of life made all the difference.

Jim quickly called 911. The responding ambulance, with paramedics Nick Watts and Mark Torrence, wasted no time getting Mike to Tillamook County General Hospital's (TCGH) Emergency Department, where Matthew Turney, MD, immediately recognized his heart attack symptoms and the treatment protocol for acute myocardial infarction began.

After alerting the medical team at Northwest Regional Heart Center (NRHC) at Adventist Medical Center in Portland, TCGH nurses Celeste Greenen and Rich

Brainerd expertly prepared Mike for LifeFlight transport. From the helipad at Adventist Medical Center, Mike was whisked into the catheterization room at NRHC. Cardiologist Mark Hart, MD, had the blocked artery open within 23 minutes of Mike's arrival in Portland.

Total elapsed time from the 911 call at the beach to the lifesaving procedure: just a little more than three hours.

**FEELING BETTER** Resting in his room shortly after the procedure, Mike was relieved to find his chest discomfort and shortness of breath completely gone. An echocardiogram performed weeks after the event showed no residual damage to his heart muscle.

"You couldn't ask for better expertise, compassion or quick action on the part of all those involved with my care that day," Mike says. "Their actions, along with the seamless system for rapidly transferring me to the higher level of care I needed in Portland, saved my life. The best part is I don't even have to drive back to Portland for follow-up visits, because Dr. Hart sees patients in Tillamook weekly."

To schedule an appointment with a cardiologist, call 503-815-2292.

## Hospital accreditation: Setting the seal on quality care

You can usually count on ratings to tell you a lot about quality.

Five stars means that a hotel has first-rate accommodations. A favorable review can convey that a restaurant has good food and service. And for a hospital, earning The Joint Commission's Gold Seal of Approval shows that it meets national standards in patient care and safety.

"The Gold Seal of Approval means a Joint Commission-accredited hospital complies with the highest national standards for safety and quality of care," says Jeff Conway, MPH, associate director of accreditation and certification operations for The Joint Commission. "Accreditation is a visible demonstration to patients and the community that a hospital is committed to quality patient care."

### ASSESSING QUALITY AND SAFETY

The Joint Commission is an independent, nonprofit organization that was founded by medical professionals more than 50 years ago. It evaluates the quality and safety of care delivered in more than 16,000 health care organizations—including over 8,000 hospitals and home care organizations—in the U.S.

Not all hospitals seek accreditation from The Joint Commission. But the ones that do seek it and earn it are armed with a valuable tool.

"Joint Commission accreditation provides hospitals with standards to meet, tools to improve performance and an external evaluation of performance," Conway says. "It's an independent and objective evaluation that tells patients how a hospital is operating."

**MAKING THE GRADE** To become and stay accredited, a hospital must undergo an on-site evaluation by a Joint Commission survey team. The team can be made up of one or more health care

professionals, including doctors, nurses and hospital administrators. The visits are unannounced and take place 18 to 39 months after the previous evaluation.

"The hospital staff knows they have an accreditation survey coming, but they don't know when," Conway says.

The review team evaluates each hospital on more than 250 established quality of health care and safety standards. Areas of evaluation include:

- Infection control.
- Patient rights and education.
- Medication management.
- Medical error prevention.
- Procedures for verifying that doctors and nurses are qualified and competent.

"The survey team analyzes key operational systems that directly impact the quality and safety of patient care," Conway says.

In addition, the surveyors observe patient care as it's provided, talk directly with patients, and track several patients' hospital stays from admission through treatment and discharge.

After the review, The Joint Commission issues a report that covers areas for improvement and lets the hospital know if it has been accredited.

### BENEFITS OF ACCREDITATION

Accreditation from The Joint Commission sends a positive message to the community and strengthens patients' confidence in the hospital's care, treatment and services.

"Joint Commission accreditation helps hospitals help patients," Conway says. "Our goal is to help a hospital become a high-reliability organization for delivering safe, effective care."

For more on hospital accreditation, visit The Joint Commission's website at [www.jointcommission.org](http://www.jointcommission.org). To view a list of accredited hospitals and their survey results, go the "Quality Check" section of the website.

### JOINT COMMISSION SURVEY

## Top marks for TCGH!

Thanks to Tillamook County General Hospital's (TCGH) staff and physicians, the hospital's recent Joint Commission survey was a great success, according to Larry Davy, President and CEO.

"Accreditation decisions are based on a number of direct findings, which are items that can have a direct and immediate effect on patient care/safety," Davy says. "Our hospital's final survey report contained one direct finding, which was resolved before the surveyors completed their visit."

"Two indirect findings that do not have an immediate effect on patient care/safety were received, and these are in the process of being corrected."

Of the 17 Adventist Health hospitals surveyed, TCGH received the fewest findings to correct, a result that patients and the community can take pride in.

"The Joint Commission surveyors highly commended our hospital's quality and safety programs," Davy says. "Our patients benefit from our safety efforts and this survey experience."



# STROKE: CAN YOU GIVE ME 5?

*Here's an easy way to remember the warning signs of stroke*

**IF YOU THINK** you know the warning signs of a stroke, raise your hand—and give me five. The five warning signs, that is.

Give Me 5 for Stroke is an educational campaign to help people recognize the symptoms of stroke—in themselves or others—and get help fast.

According to the American Heart Association (AHA), about every 40 seconds, someone in this country has a stroke. A clot-busting medication can help treat the most common type of stroke—but only if it's given shortly after symptoms appear.

That's why it's so important to learn the symptoms of stroke and why organizations like the American Academy of Neurology, the American College of Emergency Physicians and the AHA are hoping Give Me 5 for Stroke will help.

You might say they're counting on it.

**About every 40 seconds, someone in this country has a stroke. That's why you need to know the signs of stroke.**

**WHAT IS STROKE?** A stroke is like a heart attack to the brain. When a blood vessel to the brain bursts or is blocked by a clot, the blood and oxygen feeding that part of the brain are shut off. Starved for nutrients, the affected brain cells begin dying.

Most strokes are due to clots, and that's actually a good thing. A medication called tissue plasminogen activator, or TPA, can destroy the clot and restore blood flow. But it must be given within three hours of the stroke's start.

Three hours might seem like a long time. In those three hours, however, you must: ● Notice something is wrong. ● Recognize the symptoms as a possible stroke. ● Call for emergency help. ● Get to the hospital. ● Have stroke diagnosed. ● Receive TPA.

If you think someone is having a stroke, ask the person

to give you five, which means testing the following five body functions:

- 1 **Walk.** Can the person stand straight? Is his or her balance off? Is one foot dragging?
- 2 **Talk.** Is his or her face droopy or speech slurred? Can the person speak clearly and make sense?
- 3 **Reach.** Is one side weak or numb? Can he or she raise both arms together, or does one arm fall? Test each hand's grasp by asking the person to squeeze your fingers.
- 4 **See.** Is the person's vision all or partially lost? Can he or she see clearly? Is any part of the visual field blocked or blurred?
- 5 **Feel.** Does the person have a severe headache? Is that usual, or is this headache different from normal?

Any symptom—even one, and even if it goes away—may signal a stroke, so get immediate medical help.

## Are you susceptible to stroke?

**One way to prevent death or disability from stroke is to be familiar with its warning signs so that you can get medical help fast.**

**But it's even better to prevent stroke from occurring in the first place.**

**You can do that by finding out how many risk factors for stroke you have and then working with your doctor to lessen them.**

**Some of the most critical risk factors include:** ■ High blood pressure. ■ Smoking. ■ Diabetes. ■ Artery disease. ■ Heart disease. ■ Blood disorders, such as sickle cell anemia. ■ A history of transient ischemic attacks, or warning strokes.

**High cholesterol, obesity, and drug or alcohol abuse also add to your risk.**

**Not everything that raises a person's vulnerability to stroke can be altered, of course. Some factors are fixed, such as age, family medical history and ethnicity.**

**Still, knowing all your risk factors can help you and your doctor develop a plan to lower the likelihood that you'll have a stroke.**

Source: National Institute of Neurological Disorders and Stroke



## STRIKING OUT STROKE

*Telestroke Network brings Providence Brain Institute experts to Tillamook*

**IF SOMEONE HAS A STROKE**, faster care can mean a better outcome. That's why Tillamook County General Hospital (TCGH) and Providence Brain Institute are working together to provide the most advanced stroke care.

Now, along with excellent emergency care, you and your loved ones have access to some of Oregon's top stroke specialists 24 hours a day. Through an advanced video system on a secure Internet connection, Providence Telestroke Network allows Portland-based neurologists from Providence Brain Institute to be in the room with you, your family and your TCGH emergency physicians. The Providence neurologists can review records and diagnostic results, perform a full examination, and consult

with your local clinicians to help determine the best course of treatment for you.

"This will dramatically improve the treatment and outcome for stroke patients living in Oregon's communities," says Bonnie W. Smith, Administrator of Providence Brain Institute. "Once a patient has a stroke, every second counts. If we can share our expertise in real time to ensure appropriate diagnosis and treatments, we can minimize unnecessary travel time to transfer patients between outlying communities and Portland."



As a part of the Providence Telestroke Network, TCGH physicians have a 24-hour portal to Providence Stroke Center, a program focused on improving stroke care for patients with results that are backed by evidence:

# HIGH BLOOD PRESSURE: IT'S A BIG DEAL

**HIGH BLOOD PRESSURE** can be a sneaky problem. It usually takes many years to develop, and there are almost never any symptoms. In fact, most people who have high blood pressure feel perfectly healthy.

But slowly and behind the scenes, high blood pressure—also called hypertension—can cause serious health problems. Increased risk of stroke, heart problems and kidney trouble are among the maladies linked to the condition.

That's why it's important to have your blood pressure checked regularly. If it's too high, there are ways to get it under control. If it's normal, good health practices can help keep it there.

**BLOOD PRESSURE BASICS** Blood moves through your blood vessels under pressure. The pressure during a beat is called systolic pressure. The pressure between beats is called diastolic pressure. Those two measurements make up your overall blood pressure reading.

**It's important to have your blood pressure checked regularly. If it's too high, there are ways to get it under control.**

According to the National Heart, Lung, and Blood Institute (NHLBI), normal blood pressure is less than 120 millimeters of mercury (mm Hg) systolic and less than 80 mm Hg diastolic. As those readings increase, the risk of health problems also rises.

That's why the NHLBI recommends that most people try to keep their blood pressure below 140/90. One exception: people with diabetes. The goal for them is to keep blood pressure below 130/80.

**WHO'S AT RISK?** About 1 in 3 American adults have high blood pressure, according to the NHLBI. The risk of developing it goes up with age. For men, the risk starts at about age 45, and for women, at about age 55. Over half of all Americans 60 and older have blood pressure that is too high.

Other risk factors include: ● Having a family history



of high blood pressure. ● Being African American. ● Smoking. ● Being overweight or obese. ● Eating too much salt. ● Not getting enough physical activity.

**HOW TO LOWER YOUR RISK** If your blood pressure is normal, good for you. Controlling certain risk factors can help keep it that way.

Of course, some things—like your age, sex, race or family history—can't be changed. But you can lower your risk of developing high blood pressure by paying attention to factors involving your lifestyle. For example:

- If you smoke, try hard to quit.
- If you're overweight, lose the extra pounds.
- Limit your salt intake.
- Be physically active. Aim for at least 2½ hours a week of any activity that raises your heart rate, such as walking, doing yard work or playing sports.

If you already have high blood pressure, those same lifestyle practices can help bring it under control. If lifestyle changes alone aren't enough, your doctor may prescribe medicine to lower your readings.

Ask your doctor how often you should have your blood pressure checked to make sure your treatment plan is working.



## Seeing white

Your blood pressure can go up and down depending on what you eat, the medications you take, the emotions you feel and other factors.

For some people, even the stress of going to the doctor's office can temporarily raise blood pressure. This is called white-coat hypertension.

If your doctor suspects that your pressure is high

only while you're in the office, he or she may ask you to use a personal blood pressure monitor and record your levels at home. Or you may be asked to wear a device that automatically records blood pressure every 30 minutes for 24 hours.

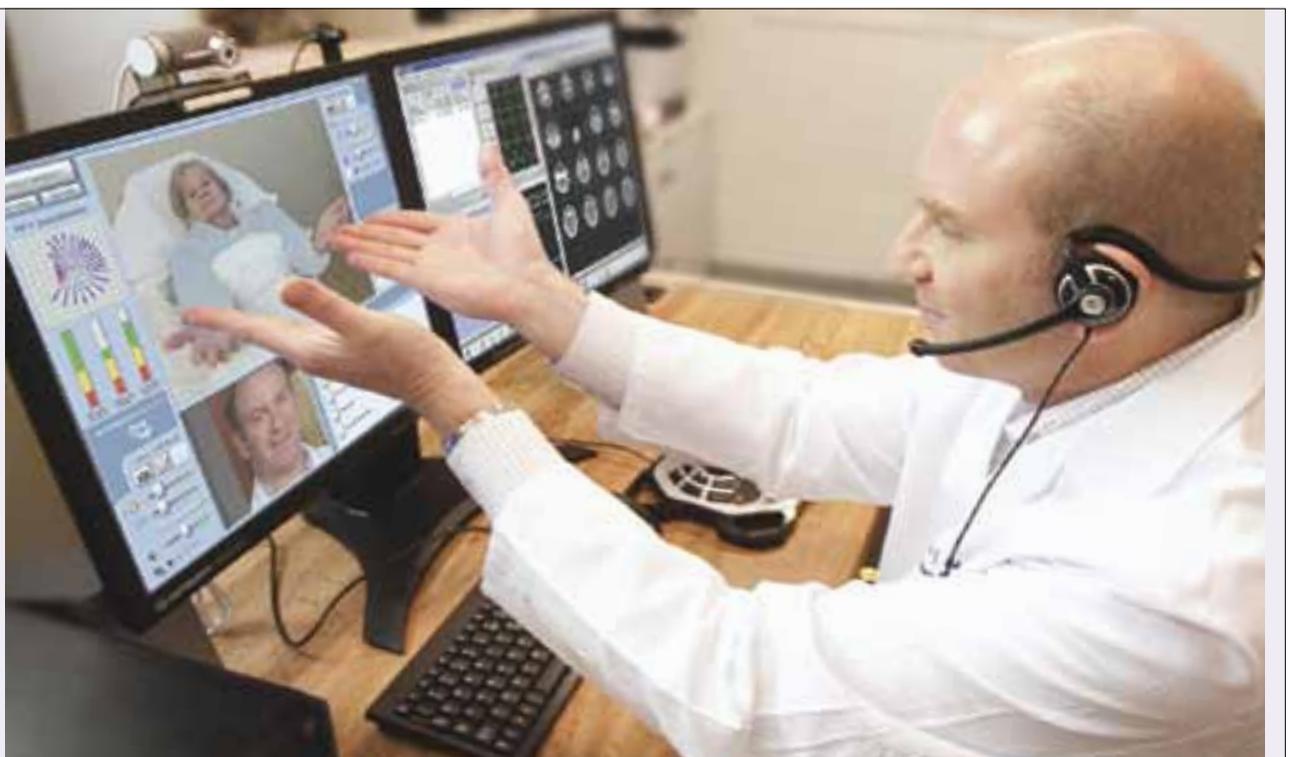
By working with your doctor, you can get an accurate assessment of your blood pressure.

Sources: American Heart Association; National Institutes of Health

- Stroke patients cared for by neurologists at the time of their emergency have better outcomes.
- Stroke treatment units that care for a higher volume of patients with clots, hemorrhages and aneurysms have a lower percentage of stroke deaths.
- An organized, multidisciplinary approach to post-stroke care and rehabilitation reduces death and disability.

Having access to Providence Telestroke Network means you can receive the most effective treatments right in Tillamook, near your family and friends.

"This new telemedicine service will allow patients with stroke symptoms who come to our Tillamook Hospital Emergency Department to have an immediate consultation with a neurologist who can see and interact with the patient, as well as view their diagnostic tests," says Emergency Medicine Physician Mark Bowman, MD. "This brings the specialty services of a neurologist to Tillamook right when our patients need them."



# HOSPITALISTS DIFFERENT KIND OF MEDICAL EXPERT

**SPECIALISTS ABOUND** in medicine. Cardiologists, neurologists and rheumatologists are just a few of the familiar ones.

But there's a newer medical specialty that may be less well known.

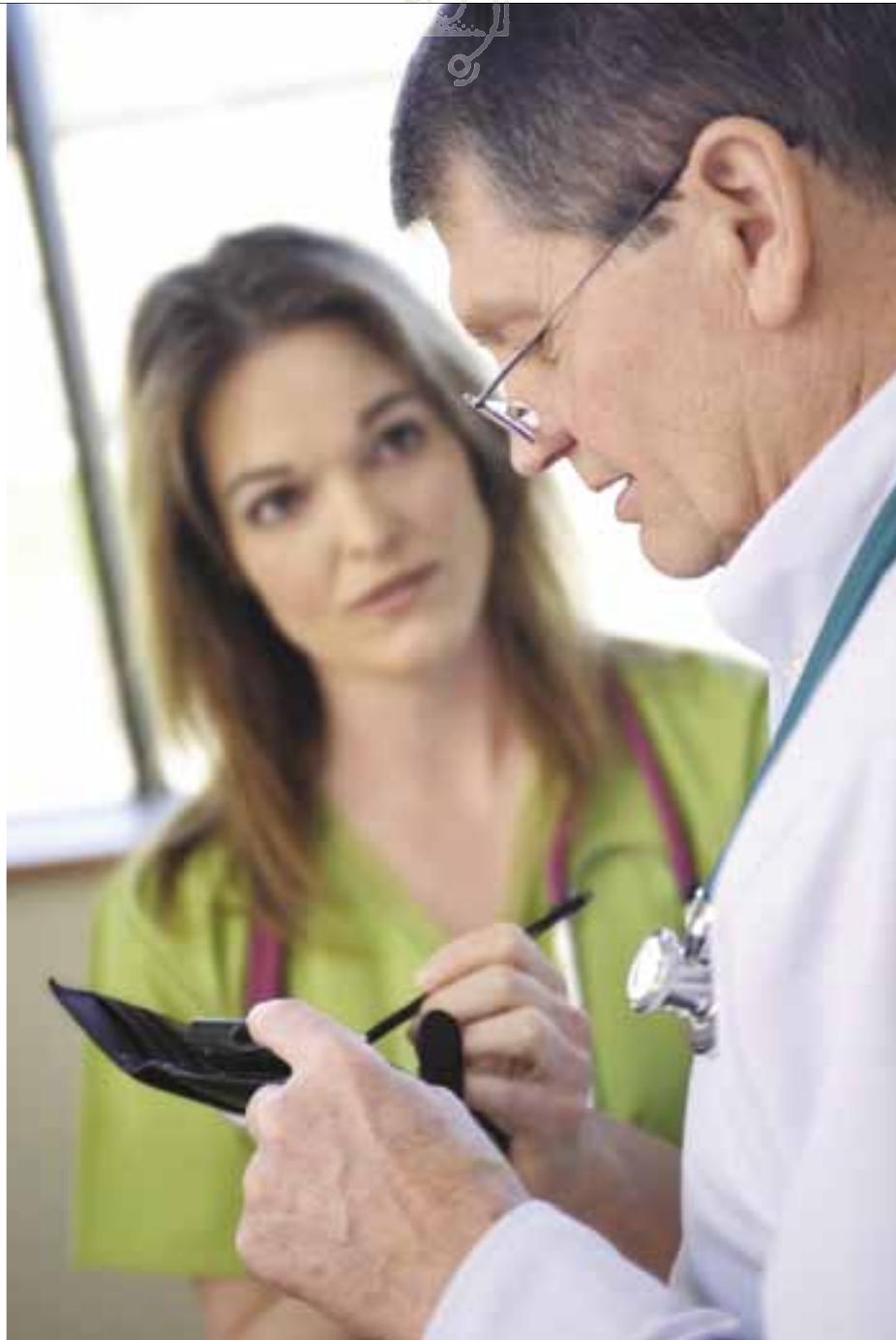
Unlike doctors who are experts at treating specific organs or diseases, doctors in this field focus instead on a specific kind of patient—one who's in the hospital.

These doctors are called hospitalists. Their job is to coordinate the care of people in the hospital—and it's no easy task. That's because people who go to the hospital these days are typically sicker and require more complex medical care than those who were hospitalized years ago.

Among these patients, serious health problems or chronic diseases—such as emphysema, congestive heart failure, diabetes or kidney disease—are common.

**THE BENEFITS** Hospitalists differ from other medical specialists in another important way. Unlike doctors who spend most of their time tending to patients in a private office, hospitalists are based at the hospital.

Having these experts on-site pays important dividends



a patient gets the right treatment at the right time. He or she can see a patient quickly and as often as needed. That can be crucial for someone coping with a complex or quickly changing medical condition.

- A hospitalist can meet with patients and their families to provide medical counseling and education.
- Because they work in the hospital full time, hospitalists are familiar with the hospital staff and are well versed in hospital procedures. This experience can help hospitalists coordinate hospital systems, improve quality and control costs for patients.

**Hospitalists can help shorten a patient's hospital stay and reduce readmission rates.**

- Some hospitalists help develop medical guidelines for hospitals and help improve patient safety and satisfaction.
- Hospitalists can help shorten a patient's hospital stay and reduce the need for readmission.

**MORE TO COME** Hospitals across the country are seeing the benefits of hospitalists.

An estimated 30,000 hospitalists are practicing today in more than 3,300 hospitals, reports the SHM.

Hospitalists represent the future of health care. Experts believe the field is poised to play a major role in health care as it is reshaped in the coming years. With growth like this, don't be surprised if you're helped by one of these specialists the next time you're in the hospital.

## Meet Tillamook's hospitalists



Rex Parsons, MD

Rex Parsons, MD; James Rushing, MD; and Calvin Hill, MD, are three of the hospitalists who care for patients at Tillamook County General Hospital.

While on duty, they are always available to treat patients who are hospitalized, and that means better care for you.



James Rushing, MD



Calvin Hill, MD

# WELCOME, DR. BOHLMAN

**TILLAMOOK COUNTY GENERAL HOSPITAL** welcomes Internal Medicine Physician John Bohlman, MD, to Tillamook Medical Group. Dr. Bohlman is board-certified in internal medicine and emergency medicine.

A native of the Walla Walla Valley, Dr. Bohlman graduated from Loma Linda University School of Medicine, where he also completed his medical residency. For the past 27 years, he has practiced medicine in Lincoln City.

Dr. Bohlman enjoys treating patients who have pulmonary and digestive diseases. Other areas of special interest include infectious diseases and cardiology. He also occasionally participates

in study protocols with various research partners.

"I want my patients to know that I will be an active partner with them as we work together through what can be complex physical and emotional issues," Dr. Bohlman says.

**For an appointment with John Bohlman, MD, Internal Medicine Physician, call 503-842-5546.**

"Health care works best with a team approach, and I will work closely with my patients to improve their health," he says.

Dr. Bohlman and his wife, Paula, have four grown children. Longtime Oregon Coast residents, they look forward to meeting new friends in Tillamook County.

To schedule an appointment with Dr. Bohlman, call 503-842-5546.



**HERE FOR YOU:** Our team of friendly registered nurses invites you to call 503-815-2292 with questions or to schedule an appointment.

### OUTPATIENT THERAPY SERVICES

## Providing outstanding care

Let the staff at the Tillamook County General Hospital's Outpatient Therapy Services care for you in our new location on the third floor of the hospital.

This clinic offers four spacious patient rooms in relaxing surroundings built for the comfort of our patients. With our specialized staff of compassionate professionals, your care will be provided in a friendly and comfortable atmosphere.

Services include:

- Medical infusion services, such as:
- Antibiotic infusions. ● Crohn's disease treatments. ● Electrolyte replacement.
- Hydration.
- Hematology/oncology services, such

- as: ● Iron therapy Infusions. ● IV immunoglobulin infusion therapy. ● Albumin infusions. ● Antiemetic infusion. ● Rhogam therapy. ● Rituxan infusions. ● Therapeutic phlebotomy. ● Blood product transfusions. ● Chemotherapy.
- Rheumatology infusion services, such as: ● Boniva. ● Reclast. ● Remicade.
- Wound care and dressing change services.
- Catheter care services, such as: ● Insertion. ● Change. ● Irrigation. ● Specimen collection.
- Central line care services, such as: ● Dressing changes. ● Routine flushes. ● Blood draws. ● De-clotting. ● Removal.

## Michael Melvin, RN, receives exceptional nurse award

Congratulations to Michael Melvin, RN, a night shift nurse supervisor at Tillamook County General Hospital (TCGH) and recipient of the DAISY Award for Extraordinary Nurses.

Co-workers who nominated Melvin had this to say about him and the exceptional nursing care he provides. He: ● Is someone that everyone looks up to. ● Is not only a team player, but also a team leader. ● Is compassionate. ● Is a mentor for others. ● Is trustworthy. ● Is a patient advocate.

Other hospital nursing staff members nominated for the award include: Megan Davis, Laurie Sass, Michelle Germond, Jane Kruh, Gretchen Brill, Bambi Poblador, Tami Begin, Vicky Meadows, Rose DeBlock and Erica Hill.

Melvin, who grew up in Garibaldi, had originally planned to be a teacher but found he enjoyed the healing touch of direct patient care. He has used that healing touch as a registered nurse to care for many patients over the past 33 years, mostly in critical care settings. When they moved to Tillamook in 2006, he and his wife, Pam, felt they were coming home. He began working in the hospital's Emergency



Department soon after.

"It's a pleasure to honor exceptional nurses like Michael Melvin," says Donna Bechthold, Vice President for Patient Care. "This community can be proud of the skillful care that each one of our compassionate nursing staff members gives to their patients."

Established by the DAISY Foundation, this award is presented twice yearly to a TCGH nurse nominated by peers for extraordinary patient care. To date, more than 4,500 nurses from 450 hospitals have received this award.

## Health care in hard times

### 4 ways to help keep medical costs down

When spending less becomes a necessity, there are some things you shouldn't cut from the budget. Health care is one of them.

Cutting corners on your medical care might actually cost you more in the long run. More important, it may put your health in jeopardy.

Still, as deductibles and co-pays rise and many people find themselves without health insurance, lowering out-of-pocket medical expenses may become a priority.

These steps can help you stay healthy and lower your medical costs.

**1 Practice good health habits.** Make smart choices, such as these:

- Wash your hands often.
- Eat well—more fruits, vegetables and whole grains, and fewer foods and drinks that are high in calories, sugar, salt or fat.
- Get rest and regular exercise.
- Manage stress.
- Don't smoke, and avoid secondhand smoke.
- Wear seat belts in vehicles and helmets on bikes.

**2 Have a primary care physician.** Seeing a doctor periodically can help you stay well. You can keep your immunizations up-to-date, which may help you avoid illnesses such as influenza and shingles.

Your doctor may suggest screening tests. These tests may catch health problems early, when they might be easier—and possibly less expensive—to treat.

**3 Know when to seek help.** According to the American College of Physicians, many minor medical problems, such as a cold, correct themselves or improve in a matter of days.

However, if you don't get better or if

## Caregivers: Do you need a break?

For families with a loved one who needs care and supervision, getting away for a few hours to run errands, go shopping or just have lunch with a friend can be a challenge.

The help you need—we call it respite care—can be as close as a phone call away.

Faith in Action (FIA), a community outreach program of Tillamook County General Hospital (TCGH) in partnership with local agencies and churches, offers two types of respite care.

In some cases, a screened and trained FIA volunteer can come to your home and stay with your loved one for a couple of hours.

When more time or personal care is needed, Wellspring Respite Day Centers (held by FIA at local churches) offer six hours of loving care that includes supervision by a licensed nursing professional.

TCGH also partners with local Northwest Senior and Disabilities professionals to offer special classes with no charge to give caregivers the tools and confidence they need to successfully care for their loved one. Please turn to the calendar on the back page for more information.

you're not sure whether you need help, do seek professional advice. And always get immediate help for a medical emergency.

**4 Ask about generic medications.** Generic drugs cost less, but have the same purity, strength and quality as their brand-name counterparts, according to the U.S. Food and Drug Administration.

Assistance programs may be available if you can't afford your medications. Ask your pharmacist for details.

Whatever you do, don't decide on your own to stop taking your medicine. If you're worried about the cost—or any other aspect of your care—talk to your doctor.

## Hospital employees have great Spirit of Giving

The spirit of giving is alive and well throughout Tillamook County, especially here at Tillamook County General Hospital. You may not ever see it in the news headlines, but the staff and volunteers of our hospital family give back to our community in a number of ways.

One of those ways is by making personal contributions during the fall Spirit of Giving campaign. This past fall, hospital staff and volunteers gave nearly \$16,000 to the Tillamook County United Way campaign while also giving more than \$15,000 to hospital funds and programs.

Each month, our hospital family collects nonperishable food that is donated to the local food bank. In 2010, about 400 pounds of food was donated. Fourteen families were adopted during the holiday season through the Tillamook Ecumenical Community, for which staff provided gifts and food.

You will also see members of our hospital family serving with a number of local organizations doing good things in our community. These include civic clubs, health and human service coalitions and boards, 4H, various area church programs, public safety groups, and arts organizations.

# DON'T MISS THESE COMMUNITY EVENTS

All classes will be held at Tillamook County General Hospital (TCGH) unless otherwise noted. For more information, call 503-815-2270 or go to [www.tcgh.com/events](http://www.tcgh.com/events).

## Better Health

### LIVING BETTER WITH DIABETES

■ Tuesdays and Thursdays, March 1 to 10, March 29 to April 7 9:30 a.m. to noon  
North County location  
■ Thursdays, April 14 to May 5

6:30 to 9 p.m.  
TCGH third-floor conference room A

Referral by a health care provider is required. To schedule a one-hour nutrition counseling session before class, call 503-815-2292. Most health insurance plans are accepted. For information, call 503-815-2443.

### FREE POWERFUL TOOLS FOR CAREGIVING

Wednesdays, Feb. 9 to March 16

10 a.m. to noon  
Tillamook SDA Church

Empowers caregivers with tools and confidence to successfully care for their loved one. To register, call 503-815-2270.

For respite care, call 503-815-2272.

### CHIP (CORONARY HEALTH IMPROVEMENT PROJECT) FREE INFO SESSION

March 22, 24 or 30 6:30 to 7:30 p.m.

TCGH third-floor conference rooms

Choose one free hour-long information session.

The program runs from April 1 to May 4.

For information, call 503-815-2270.

### ALZHEIMER'S: UNDERSTANDING THE BASICS AND EARLY ONSET

Wednesday, March 9 1:30 to 3 p.m.

TCGH third-floor conference room

Sponsored by the Alzheimer's Association.

### ALZHEIMER'S: LEGAL AND FINANCIAL CONCERNS

Wednesday, April 13 1:30 to 3 p.m.

TCGH third-floor conference room

Sponsored by the Alzheimer's Association.

## Prenatal Care and Women's Health

### CHILDBIRTH PREPARATION CLASS

Wednesdays, March 2 to 23

7 to 9 p.m.

TCGH third-floor conference room A

\$40 for mom and one support person

### WOMEN'S CANCER SURVIVOR SUPPORT GROUP

First Wednesday of each month

10:30 a.m. to noon  
312 Laurel Ave., Tillamook

Call 503-842-4508.

## Respite Care

### WELLSPRING ADULT RESPITE CARE

■ Second and fourth Tuesdays of each month

Tillamook United Methodist Church

■ First and third Wednesdays of each month

Tillamook SDA Church

■ First and third Thursdays of each month

Covenant Community Church, Manzanita



■ Second and fourth Thursdays of each month  
Beaver Community Church  
10 a.m. to 4 p.m.

\$29 per day; financial assistance available.

Call Faith in Action at 503-815-2272.

## Support Groups

### ALZHEIMER'S AND CAREGIVER SUPPORT GROUP

Third Wednesday of the month

10:30 a.m. to noon  
Tillamook SDA Church, lower level

For information, call 503-815-2270. For respite care, call 503-815-2272.

### DIABETES AND ALL THAT JAZZ

Second Tuesday of the month

1:30 to 3 p.m.

TCGH third-floor conference rooms

For more information, call 503-815-2443.

### CHIP SUPPER CLUB

Second Monday of the month

5:45 to 8 p.m.

Tillamook SDA Church, lower level

To RSVP, call 503-815-2270.

### GRIEF SUPPORT GROUP

First and Third Tuesdays of the month

3 to 4:30 p.m.

TCGH third-floor conference rooms

For more information, call 503-815-2313.

### NORTH COAST GLUTEN-FREE SUPPORT GROUP

First Thursday of the month

7 to 8:30 p.m.

Call 503-815-2270.

## Wellness Screenings

### FREE BLOOD PRESSURE SCREENINGS

Wednesdays

2 to 3 p.m.

TCGH cafeteria

### GENERAL WELLNESS SCREENINGS (BLOOD PRESSURE, CHOLESTEROL AND BLOOD SUGAR)

\$20

■ Tuesday, March 8 8 to 10 a.m.

North County Recreation District, Nehalem

■ Thursday, April 14 9 to 10:30 a.m.

North Coast Home Care, Tillamook

## NEED A HEALTH PARTNER?

Adventist Health/Tillamook Medical Group

### Cardiology

Ronald Chelsky, MD  
Mark V. Hart, MD

### Family Medicine

Shirley Arneson, ANP

Ann Batchelder, ND, FNP

David Bradburn, MD

Teresa Callahan, MD

Ben Douglas, MD

Irene Martin, MD

Karl Meier, MD

Brandon Mitchell, DC, MD

Glen Saylor, MD

Rob Soans, PA

### General Surgery

Todd Pitts, MD

### Internal Medicine

Calvin Hill, MD

### Obstetrics and Gynecology

Brittany Gerken, MD

### Oncology

Gerald Gibbs, MD

### Podiatry

Scott A. Doherty, DPM

### Other Specialists Available:

#### Ophthalmology

Martin Balish, MD

Jennifer Ballentine, MD

#### Orthopedic Surgery

Ronald Teed, MD

#### Otolaryngology (ENT)

Roger Miller, MD

#### Urology

James Pappas, MD



503-842-5546

## WHERE TO FIND US



LIFE AND HEALTH is published as a community service for the friends and patrons of TILLAMOOK COUNTY GENERAL HOSPITAL, 1000 Third St., Tillamook, OR 97141, telephone 503-842-4444, [www.tcgh.com](http://www.tcgh.com).

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# Life & Health

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