

Kootenai Health

ISSUE 1 | 2016

NO MORE BLOOD THINNERS

New treatment offers options for atrial fibrillation.

Safer surgery

TAVR is a minimally invasive treatment for aortic stenosis.

Ticker TLC

Get your heart health checked at our monthlong screenings.



KootenaiHealth



***U.S. News* calls us #1 in Idaho.**

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We've been ranked the number one hospital in Idaho by *U.S. News & World Report*. We've received the Magnet designation for nursing excellence, a distinction earned by only 7% of hospitals nationwide. We've been nationally verified as a Trauma Center by the American College of Surgeons. But as nice as all those accolades are, none mean as much as our interaction with you. Because being in the moment is far more important than being in the spotlight.

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KootenaiHealth

MAYO
CLINIC

CareNetwork
Member

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KOOTENAI HEALTH

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Opening Thoughts

FOR FEBRUARY 2016



Jon Ness, CEO

With the grand opening of the hospital expansion this March, it is impressive that those planning the project identified the exact date for its opening nearly two years ago. This wasn't just lucky; it was the result of three important strategies that are just as important to health care as they are to the construction industry. Interestingly, they are three things we have been developing at Kootenai Health for many years.

Experienced and skilled leadership. Education and innovation are important. They are the key elements that keep any organization or industry moving forward. However, there is no substitute for hands-on experience. We were pleased to have Jeremy Evans, Executive Vice President of Operations, and Derek Miller, director of Facility Planning and Property Management, on the Kootenai Health team.

Outstanding regional partners. A project of our hospital expansion's size and scope would not be possible without the collaboration of many different companies, including architects, engineers, and skilled trade workers such as electricians, plumbers, painters, etc. We see this in health care as well. Recent projects such as the Northern Idaho Crisis Center and the Kootenai Care Network are the result of many groups and individuals working together. As a result, we don't just have more people offering the same services; we have people working together to create something new for the benefit of our community.

Tremendous collaboration. During the construction of the hospital expansion, crews from every construction specialty met each week to coordinate their locations and work schedules. This allowed everyone to work most efficiently. This same level of coordination is happening behind the scenes at your doctor's office, when you have a diagnostic screening and when you visit the hospital. It ensures that you have the best experience and the best outcome possible.

I am always grateful for the tremendous dedication Kootenai Health employees have to caring for our patients. I am equally grateful for our many, many good partners in northern Idaho and eastern Washington—whether they are in health care or the construction industry.

Jon Ness,
CEO, Kootenai Health

Starting Strong

CONSTRUCTION FOR THE KOOTENAI CLINIC POST FALLS EXPANSION IS UNDERWAY

By Andrea Nagel

Construction crews broke ground on the new Kootenai Clinic Post Falls building last November. The process began by tearing down portions of the existing facility before starting construction on the new building.

“We had to deconstruct part of the existing facility in order to add this one on,” said Derek Miller, director of facility planning and property management. “Next we’ll begin erecting the steel beams and begin framing the new structure.”

The expansion is designed to coordinate with the new east expansion in Coeur d’Alene. By creating a cohesive look, patients will be able to recognize a Kootenai Health or Kootenai Clinic facility easily.

Crews are expected to finish the exterior work through the winter, with interior work beginning in April.

“We’re planning for the building to be complete in December of 2016,” Derek said. “Once the finishing touches are complete, we can begin phasing in occupancy.”

The project will create more than 75 construction jobs and 20 permanent positions. It is being funded as part of Kootenai Health’s master facility plan, which also includes the east expansion of the hospital, a remodel and expansion of the emergency department, and expanding the main operating suites.



WATCH US GROW

Learn more about the new Kootenai Clinic Post Falls expansion, watch an informational video, and view a complete list of current and future services at KH.org/expansion.

An Alternative to Blood Thinners

A NEW DEVICE CAN HELP PREVENT STROKE IN PATIENTS WITH ATRIAL FIBRILLATION

By Andrea Nagel

Approximately a quarter of all strokes can be attributed to atrial fibrillation (also known as AFib or AF), a condition where the heart quivers or has an irregular heartbeat. Patients with AF have an increased risk of stroke and are often treated with strong blood thinners, such as Coumadin or Warfarin, to reduce this stroke risk. Now, Kootenai Heart Clinics Northwest is the first in the Inland Northwest to use a new procedure for stroke prevention, providing an alternative to blood thinners. Only 100 centers nationwide are

approved to implant this new device. Dennis Cooke, M.D., Timothy Lessmeier, M.D., and Michael Williams, M.D., make up the three-cardiologist team that is currently implanting the Watchman.

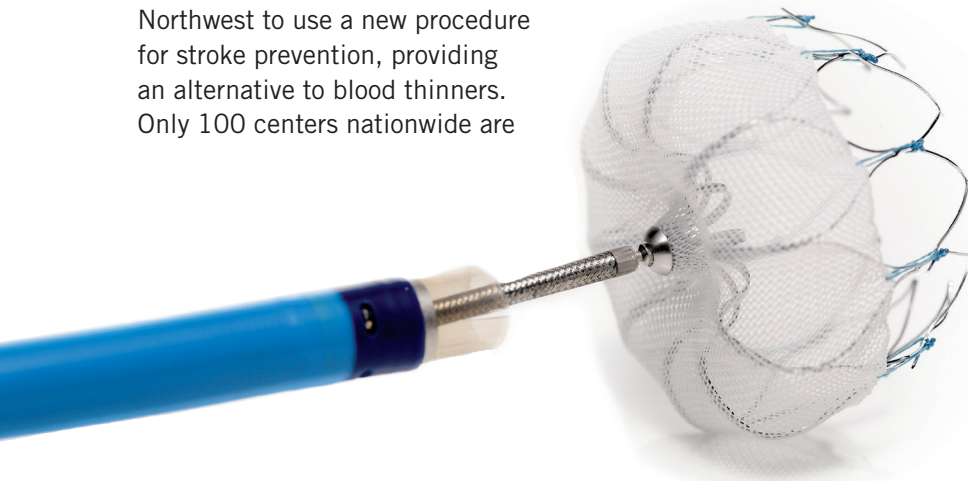
HOW IT WORKS

During atrial fibrillation, the upper chambers of the heart (the atria) no longer beat effectively—they

quiver. This quivering of the heart allows blood to collect and sit in an area called the left atrial appendage, causing clots to form. If these clots are released, the patient can have a stroke.

“I would say about 90 percent of strokes in patients with AFib are caused by these clots coming from the left atrial appendage,” said Dr. Cooke, interventional cardiologist with Kootenai Heart Clinics Northwest. “Blood thinners can be used to prevent these clots from forming, but these blood thinners come with risk factors of their own, including bleeding.”

The Watchman Device, a new tool, is permanently implanted into the left atrial appendage via a quick procedure. The device is inserted through a catheter from the groin into the appendage opening. It blocks blood flow to and from



Gerald Lakin was the first patient to receive a Watchman Device at Kootenai Health. This new device is able to reduce a patient's risk of stroke without the use of blood thinners.



the appendage, preventing clots from leaving the heart. Over time, the heart grows new tissue over the mesh material of the Watchman Device, creating a permanent wall.

Gerald Lakin was the first patient of Kootenai Heart Clinics Northwest to receive the device. Gerald began experiencing atrial fibrillation symptoms over 20 years ago while living in western Washington. He managed his AFib with medication and continued on that care plan when he and his wife of 52 years retired to Coeur d'Alene 16 years ago.

In 2014 Gerald underwent an ablation at Kootenai's Heart Clinics Northwest to treat his AFib.

Despite the ablation, Gerald had a stroke shortly after.

"I met with Dr. Cooke, and he suggested trying the procedure to reduce my stroke risk," Gerald said. "I'm looking forward to moving off of my blood thinners and still reducing my risk of having another stroke in the future."

On Oct. 30, Gerald underwent the short procedure to have the device implanted. Because the recovery process is easy for Watchman patients, he was able to return home the next day and get back to his normal daily activities.

"There will be a time following the procedure when patients will still be on an anticoagulant,"

Dr. Cooke explained. "But patients will be weaned off this medication over the course of about 12 weeks."

ARE YOU A CANDIDATE?

Candidates for the procedure are patients who have AFib, are at a high risk for stroke, and may have complications with bleeding due to blood thinners, or have a strong objection to taking blood thinners.



HELP YOUR HEART

If you are interested in learning more about new procedures and treatments available at Kootenai Heart Clinics Northwest, visit kh.org/hcnw or call the main office at (208) 625-5250.



CARE FROM THE HEART

Want to learn more about Kootenai Heart Clinics Northwest or find a physician? Call their Coeur d'Alene office at (208) 625-5250 or visit KH.org/hcnw.

TAVR

MINIMALLY INVASIVE VALVE REPLACEMENT HELPS HIGH-RISK PATIENTS

By Andrea Nagel

As our bodies age, our muscles, organs and other systems become more prone to disease or failure. Aortic stenosis, the narrowing and hardening of the aortic valve, is one of the more common and serious heart problems many people experience as they age. Although surgical replacement of the valve can treat the problem, it can also be strenuous on those who are at a higher risk of complications or who may have other severe health problems.

Luckily, just over three years ago the U.S. Food and Drug Administration approved a new valve replacement procedure that is minimally invasive and available at Kootenai Heart Clinics Northwest.

“The way aortic stenosis is

most commonly treated involves open-heart surgery,” said Stephen Thew, M.D., Interventional Cardiologist with Kootenai Heart Clinics Northwest. “Because this disease occurs mostly in older patients, we needed a less invasive procedure for this higher risk population. We now have that with TAVR.”

TAVR (transcatheter aortic valve replacement) allows a new valve to be inserted through a catheter rather than via open-heart surgery. The new valve is inserted within the diseased valve, allowing it to function properly. The catheter is typically inserted through the leg, but it can also be inserted through the arm or chest. These options allow Dr. Thew and his team to determine which entry point is safest

for the patient. The total procedure typically lasts about an hour.

Dr. Thew said the recovery process is easier, and most patients are able to go home and resume their normal daily activities just two or three days after the procedure.

“Patients who undergo this procedure aren’t limited in their activity afterward,” he said. “We’ve even had some patients say they felt comfortable enough to go play a round of golf a few days after surgery.”

Eric Wallace, D.O., recently joined Kootenai Heart Clinics and is the first physician in the region to have gone through a formal training program for structural heart disease, including the placement of TAVRs.

“This procedure allows us to help those that are too high-risk for surgery,” he said.

The extensive preoperative screening and evaluation process involves a number of different tests and physician evaluations.

“Our patients have a team of physicians working with them,” Dr. Wallace said. “We meet as a group to help develop the best treatment strategy for each individual patient, whether that means the TAVR procedure or surgery.”

Dr. Thew and Dr. Wallace can see TAVR patients for their preoperative screening, testing and follow-up visits in both the Spokane and Coeur d’Alene locations.



Kootenai Heart Clinics Northwest offers the TAVR (transcatheter aortic valve replacement) procedure as an alternative to open-heart surgery for valve replacements. Pictured from left: Stephen Thew, M.D., and Eric Wallace, D.O.



Jane Bosko (left) and Karie Anderson participate in Kootenai Health's Activity for Life open gym. Regular exercise is one of many ways to help keep your heart healthy.

Check In With Your Heart

REGISTER FOR THIS YEAR'S HEART TO HEART SCREENINGS

Heart disease is the leading cause of death for American men and women, claiming more than 600,000 lives each year. However, a simple screening could help you avoid becoming part of this alarming statistic.

Each year Kootenai Health's cardiac rehabilitation team offers Heart to Heart screenings throughout the month of February. Through the annual screening program, community members can get an overview of their heart health and potential risk factors for heart disease.

The screening involves a short lifestyle questionnaire and a finger stick to draw a small amount of blood for testing. In just 15 minutes, screening participants get a full lipid profile, including measurements of total cholesterol, HDL (good) cholesterol, LDL (bad) cholesterol, triglyceride and glucose levels. The test also includes evaluation of blood pressure and body mass index (BMI).

Kootenai Health staff members are on hand during the screenings to review results with participants, evaluate risk factors and recommend next steps, which could range from better nutrition to a follow-up visit with a physician.

The Heart to Heart community screenings are offered in February on Tuesdays and Fridays, 7:30 to 9:30 a.m., in Kootenai's Heart Center. Registration is required. For more information and to register for a screening, call **(208) 625-6800**. The cost is \$25. To learn more about Kootenai's Heart to Heart screenings, visit KH.org/hearttoheart.



SEE MORE ONLINE

Be sure to check our Facebook page and website frequently for other classes and events!

WAYS TO KEEP YOUR HEART HEALTHY WITH KOOTENAI

Cardiac Rehab

(12-week session)
Meets Mondays, Wednesdays and Thursdays
Call **(208) 625-4690** for schedule and registration.

Mended Hearts Support Group

Meeting times vary.
Former cardiac patient support group.
Call **(208) 625-4690** for schedule and location.

Activity for Life

Call **(208) 625-4690** for schedule.

Balance and Fit

Every Monday at 1 p.m., and the second, third and fourth Wednesday of each month at 1 p.m. Call **(208) 625-4690**.

A New Chapter Begins

EAST EXPANSION TO OPEN IN MARCH

By Andrea Nagel

The exterior of Kootenai Health has transformed dramatically since breaking ground on the new eastern expansion in August of 2014. The new building, totaling 100,000 square feet, will not only provide more space to care for our patients, it will also free up space in the existing facility for future expansion and renovations. When the doors of the expansion open for the first time this spring, so will a new chapter in the history of our community hospital.

“The expansion was designed with both our patients and staff in mind,” said Derek Miller, director of facility planning and property

management. “We want to provide a peaceful, healing environment for our patients while also providing our staff the tools and resources they need to do their jobs more effectively.”

The patient-centric design includes a convenient drive-up entrance leading into a modern, comfortable lobby and reception area. This is the first time in the hospital’s history that patients will have a formal front entrance and lobby. Patients and visitors will also have access to peaceful healing gardens and courtyards to get fresh air and find some privacy.

FRONT ENTRANCE AND LOBBY

The new main entrance is located on the north side of the building. It will offer a covered patient drop-off and pick-up area as well as free valet parking. The first thing patients and visitors will see as they enter the new lobby is a reception station. Here, a guest services staff member will greet visitors, providing an opportunity to get directions and ask questions.

The lobby will also include a new patient registration area. This will be a convenient place for patients coming in for scheduled procedures to register. The new lobby

July 23, 2014



Sept. 4, 2014



Dec. 5, 2014





will allow the current registration area, located on the south side of the main hospital, to focus on emergency patients.

On the west side of the lobby, visitors may notice a staircase. This will eventually lead to an updated waiting area that will serve the soon-to-be expanded surgical suite.

FAMILY BIRTH CENTER

The area just off the lobby is the Family Birth Center. Composed of labor and delivery, postpartum, and the neonatal intensive care unit (NICU), the unit was designed to provide a calm, private experience for new families. The design features more nurses' stations and

private rooms to help maintain a quiet, restful atmosphere.

There are now 10 labor and delivery rooms (compared to six in the former birth center), each with jetted tubs and upgraded technology. Just down the hall are

— *Continued on page 12*

Feb. 23, 2015



Aug. 30, 2015



Nov. 19, 2015





Gina McCloskey, RN, hands Svetlana McKeirnan her baby boy, Maddex, in one of the new Family Birth Center's postpartum rooms.

— Continued from page 11

18 postpartum rooms (up from 12). These rooms are also private, much larger, and offer amenities like large windows, a comfortable sleeper-sofa and a refrigerator.

"The new patient rooms are nearly twice the size of the existing rooms," Derek said. "This allows the mother and infant to be in the same room while also accommodating visitors."

The new NICU consists of

12 rooms, with two of them equipped to handle twins if needed. Infants will have their own rooms with the latest technology available.

"The care for sick and premature babies continues to evolve at Kootenai Health," Kimberly Judd, M.D., neonatologist, said. "With the new expansion, plans are in place to extend that care to include even smaller infants—those

born as early as 28 weeks and weighing 1,000 grams, or about 2.2 pounds."

SECOND FLOOR, ORTHOPEDICS AND NEUROLOGY

The second floor of the expansion is dedicated to orthopedics and neurology. All of the new patient rooms are 40 percent larger, with amenities for patient education, communica-

CONSTRUCTION BY THE NUMBERS

12,388
sheets of
drywall

4,274
power
outlets

3,500
yards of
concrete

770
tons
of steel

2,267
light
switches

tion and entertainment. Much like the Family Birth Center rooms, the layout of the second floor is designed to reduce noise and streamline care. It includes 32 rooms split between five nurses' stations.

The second floor connects to the existing hospital via three hallways, making transporting patients between buildings easier. The rooms have large windows with beautiful views.

"We've said from the beginning that we hope to bring the outside in," Derek said. "This will help promote relaxation and healing for our patients."

The orthopedic department will host the Total Joint Replacement Program and include a special rehabilitation gym for joint replacement patients (read more about Kootenai's Total Joint Replacement Program on page 18).

PATIENT INFORMATION NETWORK

Each patient room will have a TV and Information Network. This tool serves as a central communication hub for patients, families and care team members—providing up-to-date and personalized care plan information that is easy to navigate and understand.

The information network will automatically populate important



On the second floor, 32 patient rooms are split between five nurses' stations to help reduce noise and streamline care. Pictured from left are Anna Werner and Gina McCloskey.

patient information and identify who makes up the patient's medical team. Nursing staff will work with the patient and their caregivers to track medications and other care statistics. The system houses educational videos about procedures and ailments and provides instructions for home care and entertainment such as TV, movies and games.

Plans to expand the system to the main hospital are underway.

WHAT'S NEXT?

The east expansion is scheduled to open this March. Several community, staff and patient events are scheduled to celebrate a successful grand opening. Even though this project is wrapping up, other

projects are already in the works for the existing facility, including expanding the operating rooms and the emergency department.

"As our patient population continues to grow, we will continue to increase our level of service," Jon Ness, CEO, said. "Seeing more patients from other communities is a good indicator that our strategic plan to be a comprehensive, regional medical center is on target."



AN INSIDE LOOK

For more sneak peeks of our grand opening, follow along on Facebook. To learn more about the expansion, visit KH.org/expansion.

565
door
handles

170
miles of
electrical
wire



236
plumbing
fixtures

78
televisions

33
exit
signs

Mammogram Outreach



By Jeanna Hofmeister

Cancer survivor is likely the last phrase that would come to mind when you meet Linda Lawhead. The bubbly, mid-50s blonde is a mom with a blended family that includes five kids and lots of grandchildren. The former hairdresser-turned-bookkeeper for Morningstar Boys Ranch had just returned home from a vigorous workout at the gym when we met.

“I know it sounds ridiculous, but honestly, it all started with the chance to win this really cool gift basket,” she chuckles. “One of my friends was going to be in a fashion show at the Coeur d’Alene Resort, and I wanted to be there, to give her moral support, because all the models were cancer survivors. So I called up another one of our girlfriends and talked her into going with me.”

The Celebrations event was just one of nearly a dozen such instances last year where Kootenai Health’s Outpatient Imaging team planned to do some community outreach. Over the past two years, Kootenai Outpatient Imaging has received \$27,500 in grants from Susan G. Komen Idaho–Montana for mammogram screening services. In that time, they’ve nearly doubled the number of their outreach programs.

“It’s hard to believe, but Idaho ranks 51st behind Washington, D.C., for people who receive mammograms,” said Jennifer Neely, program director for Kootenai Outpatient Imaging. “Our presence at community events is an effective



WHEN WAS YOUR LAST MAMMOGRAM? Be sure to schedule your appointment by calling (208) 625-6300. To learn more about outpatient imaging procedures, visit KH.org/outpatientimaging.

Program Saves Lives

way to reach people who need those services. We're constantly trying to heighten community awareness—to reach our residents as well as underserved populations, especially those who fall into the gap between Medicaid and health insurance."

That's exactly why Jennifer's team targeted the Celebrations event. "It's always amazing to think that being in those places can actually save lives."

While there, Linda happened upon the Kootenai booth and spotted the gift basket.

"To enter to win, you had to schedule a mammogram," Linda said. "When they called to tell me I had an appointment for the following Thursday, I said, 'Really? So soon?'"

EARLY DETECTION SAVES LIVES

"We're focused on early detection," Jennifer said. "Diagnosing breast cancer in its early stages can mean the difference between getting a lumpectomy and having to undergo a mastectomy. Recommended mammogram guidelines changed this past year. Previously recommended for women beginning at age 40, with annual checks continuing until age 55, the new guidelines call for mammograms to begin at age 45 with screenings every two years."

The new protocols have sparked plenty of controversy. Health care providers are openly divided on the subject. And while nearly everyone agrees that early detection is the key to saving lives, some data

indicates doctors may be over-treating patients.

"But people aren't data," Jennifer said. "We have to make human decisions."

OUTREACH THAT WORKS

The hospital's community outreach efforts expand well beyond Kootenai Health's team of experts.

"We work in tandem with other agencies to leverage grant funds for a host of programs," Jennifer said. "We want to complement, not overlap, what each of our organizations can do to provide services."

The Kootenai Health team works together with the Panhandle Health District, Komen and others to reach out to more underserved populations.

"Getting out into more rural places like the Silver Valley is a real key," Jennifer said.

"It's not enough to give people a \$10 gas card to get here for screenings. We have to go where they live. We'll work with Providence's mobile mammogram coach to take screening services to them, because that's what works."

Linda agrees. In fact, she hadn't even thought of her last mammogram.

"Post-menopause, they told me that I'd only need one every two years, and my doctor's office always scheduled them for me," she said.

After her doctor passed away, the need to schedule one for herself

slipped her mind. As it turned out, she hadn't had a mammogram for nearly three years. A week later, she went in for her mammogram. That same month, Linda was diag-

"People aren't data. We have to make human decisions."
—Jennifer Neely, program director for Kootenai Outpatient Imaging.

nosed with stage II breast cancer.

"I just never thought it would happen to me," she said.

"Early detection, conceptually, makes sense. There's no doubt that mammograms pick up low-grade and early stage cancers that perhaps aren't as aggressive," said Linda's oncologist, Kevin



Kevin Kim, M.D.

Kim, M.D., at Kootenai Clinic Cancer Services. "Now, we can cure the vast majority of patients we see because we have the technology to give individualized treatment. That's the biggest breakthrough."

One way to accomplish that is through outreach services.

"Our programs are encouraging people to pay more attention," said Dr. Kim.

It's been a little over a year since Linda began treatment.

She admitted, "I didn't win the basket, but I did get my mammogram, and that saved my life."

2015 Festival

By Marcee Hartzell

The holiday season is a time for coming together to celebrate and revel in tradition. It is also a time for thinking of others and giving of ourselves. The Kootenai Health Foundation's Festival of Trees is an opportunity to do both. As a

favorite holiday event for 27 years, the Festival has raised more than \$5.8 million to improve health care in our community.

From its opening night Friday d'Lights, to the black-tie Gala, the Festival Fashion Show and Family Day, there is something for everyone to enjoy. Every year, proceeds from the Festival of Trees help Kootenai Health deliver the best health care to

our community. This year, the more than \$360,000 raised will support the hospital expansion.

We are grateful for every tree decorator, sponsor, volunteer, employee, donor and friend. On behalf of the Kootenai Health Foundation board of directors and staff, thank you for your generosity, sharing your time and blessing us with your talents. We look forward to partnering with you in 2016.



of Trees

- 1 Delivery Day volunteers (from left) Mark Ness, Pam Thompson, Ken Berreth, Louie Knutson, and Trevor Bober
- 2 (Back row, from left) Tiffany Dodd and Tomlinson Sotheby's International Realty tree designer Shelby Hoagland; (front row, from left) Sarah Griffin, Judey Brown, Kayla Dickson, Michaela Corcoran-Hall, Lea Williams and Karin Hill
- 3 David and DeeDee Koontz
- 4 Fashion Show models Tom Singleton and his son Brayden
- 5 Fashion Show volunteers (from left) Megan Pelsma, Chrissy Flowers, Laura Memmott, Bree Todd, Pam Lisenbe, Michele Goode, April Fortier and Miki Welch
- 6 JoAnn Zajicek, the Union Gospel Mission tree decorator
- 7 Jeff Mitchell; Shana Fogarty, M.D.; Emily Peterson and Matt Peterson
- 8 Ron and Joanne McIntire
- 9 Russ and Kim Porter
- 10 Steve and Martha Garske



World-Class Total Joint Care

By Stacie Jones

KOOTENAI
HEALTH'S JOINT
REPLACEMENT
OUTCOMES AND
STANDARDS
OF CARE ARE
ON PAR WITH
ONE OF THE
TOP MEDICAL
CENTERS IN THE
COUNTRY



GET READY

Planning on having joint replacement surgery soon? Learn more at KH.org/totaljoint. If you're currently looking for an orthopedic surgeon, contact Kootenai Clinic Orthopedic Surgery and Sports Medicine at (208) 625-6700 or visit KH.org/orthopedicsurgery.

Northern Idaho residents who need a hip or knee replacement don't have to look far for world-class treatment. According to Chad Bailey's recent visit to Mayo Clinic, the level of care that patients receive in Kootenai Health's Total Joint Replacement Program compares to some of the nation's best.

Chad, orthopedic nurse practitioner at Kootenai, recently traveled to Minnesota to give a presentation at a nursing conference. While there, he had the rare opportunity to meet with joint replacement experts at Mayo Clinic's state-of-the-art campus in Rochester. During his visit, he got a personal behind-the-scenes tour of the medical facility, learned about Mayo Clinic's knee and surgery replacement techniques, and discussed best care practices.

NO NEED TO TRAVEL

The key takeaway from Chad's visit to Mayo Clinic: Kootenai Health's

joint replacement outcomes and standards of care are right on par with one of the top medical centers in the country.

"Our performance is comparable to the outcomes at Mayo," he said. "For patients, this means there's no need to travel anywhere else to get a knee or hip replaced, because based on patient outcomes, they're getting the same quality of care here at home as they would get at a globally recognized medical institution like Mayo."

In 2014, Kootenai Health became the 30th member—and the first health care organization in the Pacific Northwest—to join the Mayo Clinic Care Network. As a member of the network, Kootenai providers have exclusive access to Mayo Clinic's knowledge, expertise and resources to help improve the delivery of care locally.

"Our relationship with Mayo made it possible for me to connect

Total Joint patient Shirley Lynch works with physical therapist Jason Kampf just a day after her surgery.



with leading experts and get an inside look at what they are doing and how they do it,” Chad said. “As a result of that, I was able to compare their program practices and outcomes directly to ours. The visit validated that what we are doing here at Kootenai is great, and the relationship with Mayo will give us many opportunities to stay at the forefront as we move forward.”

A FOCUS ON RECOVERY

Currently, 70 percent of Kootenai’s knee and hip replacement patients are able to return home from the hospital the day after surgery.

Chad said Kootenai’s strong knee and hip surgery outcomes are

largely the result of evidence-based care protocols and innovative pain management, medication and rehabilitation techniques that minimize complications and allow patients to walk just hours after surgery, a crucial factor in a patient’s recovery.

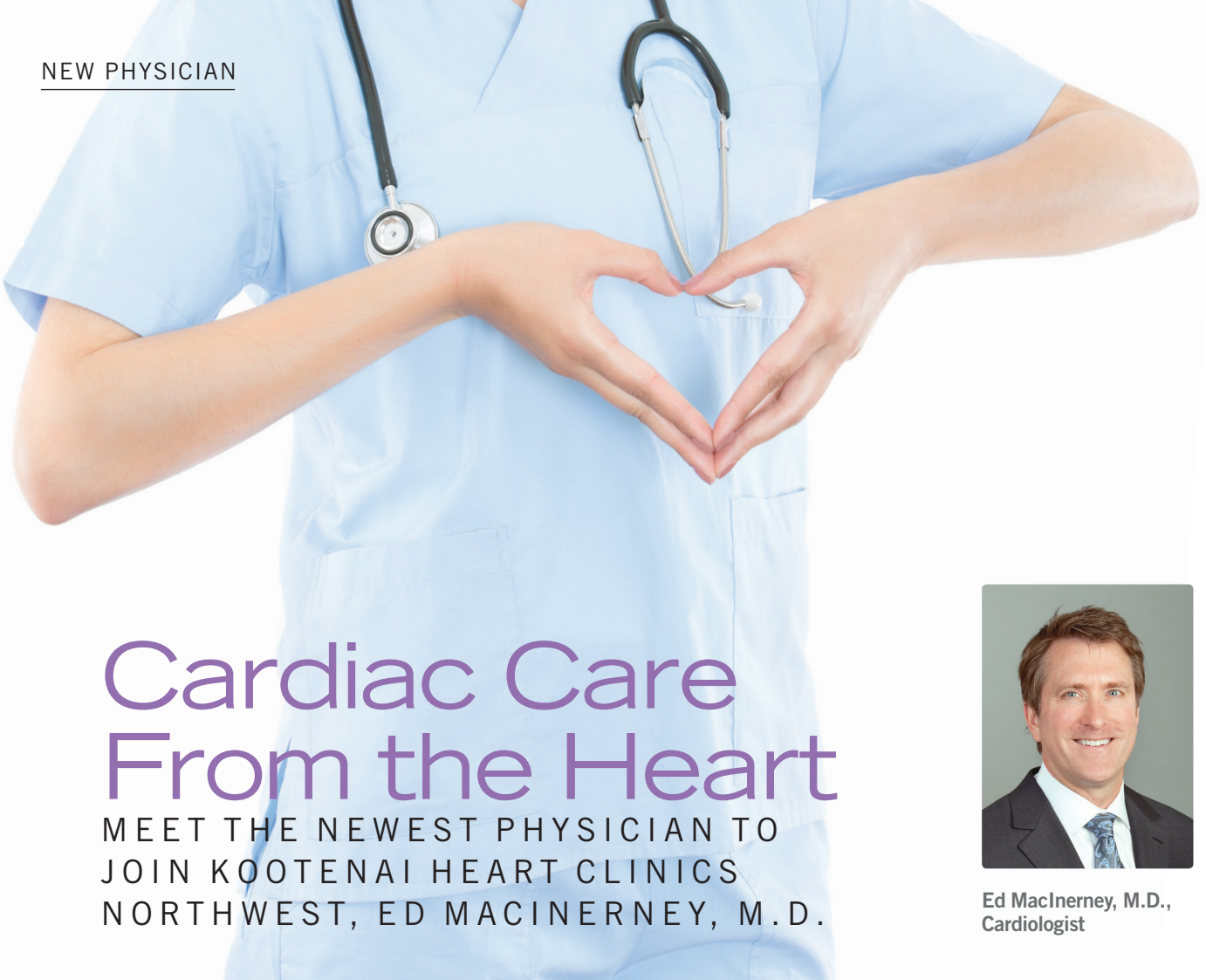
“We use a very active recovery process and focus on removing barriers that could potentially slow patients’ progress and inhibit their ability to go home and be successful in their everyday lives,” Chad said.

GROWING EVEN BETTER

Knee and hip surgery patient care and recovery will be further enhanced with the opening of the

Kootenai Health hospital expansion in March. The Total Joint Replacement Program will be housed on the second floor of the new facility and will feature a new rehabilitation gym designed specifically for these patients. It will include real-world amenities—such as a kitchen and bathtub—that will help rehabilitation patients more quickly regain their ability to function in everyday life.

“We continue the pursuit of improvement to our care practices,” Chad said. “We are always searching out new techniques and new evidence that we can assimilate here in order to provide even better patient experiences and outcomes.”



Cardiac Care From the Heart

MEET THE NEWEST PHYSICIAN TO JOIN KOOTENAI HEART CLINICS NORTHWEST, ED MACINERNEY, M.D.



Ed MacInerney, M.D.,
Cardiologist

Q Tell us a little bit about you and your family:

I'm a native Texan and spent my first quarter-century there, including college and medical school. I met my fiancée, Angela, in the Kansas City area, where I've been in private practice cardiology for the last 15 years. Angela (also a native Texan) is a social worker. Between us we have five kids, with the youngest just having left for college this fall. Our kids are spread all across the country, from L.A. to D.C. and points in-between.

Q Why did you pick your specialty?

I remember first becoming fascinated with how the human body works around age 5...weird, right? That fascination eventually

culminated in my pursuit of a career in medicine. During my internal medicine residency, I recall being mesmerized when I saw my first heart ultrasound (echocardiogram). It was captivating to see such a vital internal organ in real-time motion. At that moment, I knew that cardiology was where my heart was.

Q What can patients expect when they show up for their first appointment with you?

Patients should expect me to be their staunch and steadfast advocate. Patients will see that I value them as individuals—fellow human beings, imperfect and vulnerable, deserving of compassion. I was called to medicine by the desire to help ease suffering and improve

the human condition. This remains my calling.

Q What are some of your hobbies?

I enjoy running, cycling, hiking and other activities that get me out in nature. I cherish my time with family and friends. When time permits, an escape into a good book is always welcome.

Q What drew you to Kootenai Health?

Many factors, chief of which include the quality of the cardiology care provided by my colleagues at Kootenai Heart Clinics Northwest and the stated goals and mission of Kootenai Health. What a tremendous opportunity to practice my chosen profession in the unparalleled beauty of Coeur d'Alene.

Inside Kootenai

WHAT IS ONE THING YOU TELL ALL YOUR PATIENTS TO DO IN ORDER TO KEEP THEIR HEART HEALTHY?

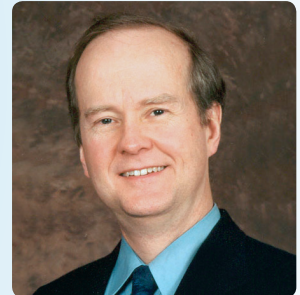


RUSSELL BLAKELEY, M.D., KOOTENAI HEART CLINICS NORTHWEST

“I encourage my patients to be physically active. Over the years, I have never had a single patient ‘work themselves to death,’ but I have had too many patients who have ‘rested themselves to death.’ The scientific research has become overwhelming regarding the importance of physical activity, not only in heart health, but in health in general. Physical activity is inexpensive, fun, and it is ‘all-natural.’ So, get up and get going!”

RONALD FRITZ, D.O., KOOTENAI HEART CLINICS NORTHWEST

“I ask my patients to spend 30 minutes exercising five days a week. I recommend this because of its proven benefit in reducing stroke, heart attack and sudden death.”



ERIC WALLACE, D.O., KOOTENAI HEART CLINICS NORTHWEST

“Stay active! Whether it’s walking, exercising, or working around the house—stay as active as possible. All of these activities, and so many others, can lower blood pressure, cholesterol, help control diabetes and reduce your risk of cardiovascular disease. If you have noticed a change in your activity level or are limited by breathing problems and chest pains, see your primary care physician or cardiologist. These may be signs of heart disease, and we can help.”



DENNIS COOKE, M.D., KOOTENAI HEART CLINICS NORTHWEST

“The single best thing you can do for your heart health is to quit smoking. If you’re not a smoker, be sure to stay in a healthy weight range. Being overweight greatly increases your risk of heart disease. Eat a healthy, balanced diet that is low in fat and sugar, with plenty of fruit and vegetables, and get regular physical activity.”





Robert Ancker, M.D., medical director of Hospice of North Idaho and a palliative care physician with Kootenai Clinic, answers common questions about palliative and hospice care.

Comfort When it is Needed Most

KOOTENAI HEALTH AND HOSPICE OF NORTH IDAHO PROVIDE COMPASSIONATE END-OF-LIFE CARE

Q I've heard a lot about palliative care, but I don't understand what it means. Is this type of care available for all people, or is it for specific patients?

Palliative care is care that aims to relieve suffering and improve the quality of life for patients with a life-threatening illness. It includes physician-guided control of pain and symptoms as well as practical support to help both the patient and his or her family. With palliative care, controlling pain and symptoms is integrated into every stage of a patient's illness, along with all other appropriate medical treatments. Patients receiving palliative care may still be undergoing disease-modifying and/or life-prolonging treatments, even though their conditions are no longer curable.

To receive palliative care, the patient's prognosis (time he or she is expected to live) may be limited, but it is usually longer than six months. Palliative care is often provided to patients who have cancer or other diagnoses such as severe heart disease,

heart failure or emphysema. Although palliative care can be given anywhere, currently our services are limited to inpatients at Kootenai Health, as well as nurse-centric outpatient Community Palliative Care through Hospice of North Idaho (limited to Kootenai County). The request to begin palliative care is typically initiated by the patient's attending physician. Either Stacie Bering, M.D., or I provide the consultation. Future services may expand to include more outpatient services in a variety of settings.

Q What is hospice, and how is it different from palliative care?

Hospice care is really a subset of palliative care. Hospice usually refers to a program that uses an interdisciplinary team—doctors, nurses, social workers—to provide comprehensive palliative care to terminally ill patients and their families or caregivers. For a patient to be placed on hospice care, his or her prognosis is usually considered to be less than six months if the disease runs its normal course.

Hospice care allows the patient

to be cared for in a home setting, but it can also be provided in a nursing home or assisted-living facility. Here in northern Idaho, we have a unique resource in our Hospice House. Hospice of North Idaho has the only certified, 12-bed Hospice House in northern Idaho. It is one of only two in the state and provides inpatient-level hospice care in a homelike setting.

Hospice does not prolong life, nor does it hasten death. It provides physical, mental, social and spiritual comfort for patients and their caregivers. It is considered the gold standard for end-of-life care. As the medical directors for Hospice of North Idaho, Shana Fogarty, M.D., and I have overall responsibility for the medical care received by hospice patients. This may include reviewing their medical records and medications, attending interdisciplinary team meetings, and being available as a resource to the primary care physicians. It also includes providing nursing, physician and community education regarding end-of-life care. We even make home visits!

Events & Classes

PRENATAL CLASSES

Classes meet in Kootenai's Health Resource Center unless otherwise noted. Space is limited. To register or for more information, call **(208) 625-6050**.

Prepared Childbirth Classes | \$60

Tuesdays, March 1 to 22,
6 to 8:30 p.m.

Thursdays, March 3 to 24,
6 to 8:30 p.m.

Tuesdays, April 5 to 26,
6 to 8:30 p.m.

Thursdays, April 7 to 28,
6 to 8:30 p.m.

Tuesdays, May 3 to 24,
6 to 8:30 p.m.

Thursdays, May 5 to 26,
6 to 8:30 p.m.

Bringing Baby Home | \$15

Saturday, March 5, 9 a.m. to noon

Monday, April 4, 6 to 9 p.m.

Saturday, May 7, 9 a.m. to noon

Breastfeeding Basics | \$15

Wednesday, March 2, 6 to 8:30 p.m.

Wednesday, April 6, 6 to 8:30 p.m.

Wednesday, May 4, 6 to 8:30 p.m.

Safe Kids Car Seat Inspections | Free

Thursdays, 1 to 4 p.m.

Kootenai Health Emergency
Entrance

Call **(208) 625-5722** for an
appointment.

FITNESS AND WELLNESS

Activity for Life | Varies

Supervised open gym activity for those with cardiac or pulmonary conditions. Call **(208) 625-4690** for more information.

Aquatics Classes | Varies

Weekdays

McGrane Center pool

Formats, times and prices vary.

Call **(208) 625-5311**, or go to
KH.org/rehab.



Balance and Fitness | Free

Mondays, 1 to 2 p.m.

Second, third and fourth Wednesdays,
1 to 2 p.m.

Heart Center Classroom

This is a free exercise program for adults who want to improve their strength, balance, flexibility and mobility while decreasing their risk of falling. Contact Donna Kalanick at **(208) 625-5722** for more information.

Community Cardiac Education | Free

Thursdays, 9 a.m. and 1 p.m.

Heart Center Classroom

Weekly Topics:

First Thursday, Stress Reduction

Second Thursday, Nutrition

Third Thursday, Medication

Fourth Thursday, Nutrition

(208) 625-4690

SUPPORT GROUPS

Support groups meet at Kootenai Health unless otherwise noted.

Women's Cancer Wellness Support

Mondays, noon to 1 p.m.

Kootenai Clinic's Cancer Services
Post Falls, 1440 E. Mullan Ave.
Call **(208) 625-4938**.

Cancer Support

Wednesdays, 1 to 2:30 p.m.

For those whose lives have been affected by cancer.

Call **(208) 625-4711**.

Prostate Cancer Support Group

First Thursday of each month,
7 to 9 p.m.

This group is for patients diagnosed with prostate cancer.

Call **(208) 625-4711**.

American Cancer Society

Look Good...Feel Better

Second Monday of the month

This free program helps women facing cancer with the appearance-related side effects of their cancer treatment. A cosmetologist will teach beauty techniques and help with head coverings. Call

(208) 691-4169.

Mended Hearts

Third Thursday of the month,
3:30 to 4:30 p.m.

Former cardiac patients help support others with cardiac or pulmonary diseases. Call **(208) 625-4690**.

Pulmonary Support Group

Second Tuesday of each month,
noon to 1:30 p.m.

Education and support to help improve your quality of life. Call **(208) 625-4691**.

Parkinson's Tele Health

Second Monday of each month,
2 to 3 p.m.

View presentations and ask questions of regional experts through live streaming. Call **(208) 635-5243**.

Follow Us



DISCOVER MORE

Call **(208) 625-6050** for more information or to register.



*Life's walking trail
Angela Dodge*



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Kootenai Clinic Appointment Center

**Need to find a physician
and schedule an appointment?**

Start here: 208.625.6767



Call our Appointment Center to find a physician and schedule an appointment at one of our Kootenai Clinic locations.

Appointment Center representatives can help you:

- ▶ Determine the type of physician you need
- ▶ Find an appointment that fits your schedule
- ▶ Answer questions on what to expect at your appointment

Call the Appointment Center at **(208) 625-6767**
or request an appointment online at appointmentcenter.kh.org

