

Kootenai Health

ISSUE 2 | 2015

Beating the Odds

Ginger Lolley is on the road to recovery after a colon cancer diagnosis.



Kootenai Health



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10
Beyond
Kootenai Health

Issue 2 | 2015

5 | ALLIES FOR BETTER CARE

The new regional cancer alliance launches first treatment program.

6 | BEATING THE ODDS

Ginger Lolley is on her way to recovery after a cancer diagnosis.

8 | DIABETES MADE EASIER WITH EDUCATION

Working with a diabetes educator can help answer your questions and alleviate stress.

10-13 | BEYOND KOOTENAI HEALTH

- ▶ *Bridging the Gap in Africa*: Asante Ministries helps Rwandans achieve success.
- ▶ *Ironman for Anna*: Fundraising helps children battling cancer.
- ▶ *Training Africa's Next Surgeons*: Randil Clark, M.D., teaches surgical procedures in Ethiopia.
- ▶ *Healing Hearts in Africa*: Kootenai heart specialists rebuild cardiology services in Rwanda.

14 | CARDIOLOGY CLOSE TO HOME

Heart Clinics Northwest offers quality care close to home.

16 | 2014 HIGHLIGHTS

Highlights from our 2014 annual report reveal great progress.

18 | YOUR COLON CANCER TEAM

From early detection to treatment, Kootenai Clinic has a team of physicians on your side.



6



14



Opening Thoughts



Jon Ness, CEO

A PASSION FOR COMPASSION

After college I had the privilege of serving two years with the Peace Corps in the Central Pacific's Marshall Islands. It was a powerful experience, and I am always pleased when I learn about a physician or staff member who has volunteered his or her time to serve on a medical mission or volunteered to help those who are less fortunate.

In this issue of *Kootenai Health* magazine, you

can read about four of the many providers in our community who are reaching beyond themselves to help people in our community and around the world (see pages 10 to 13).

The providers who undertake these missions do so on their own time and at their own expense. They don't do it for financial gain, for personal benefit or to advance their position. They step up to serve these profoundly underserved communities and vulnerable individuals for the same reason they chose a profession in health care: They enjoy helping others.

As work continues on the Kootenai Health expansion and external signs of Kootenai Health's growth become more evident, the most important aspect of health care remains intangible. It is the desire to come alongside those who are hurting and ill to restore them to health—whether they are here at home or on the other side of the world.

At Kootenai we understand the importance of facilities that provide a healing environment, equipment that makes higher levels of care possible and relationships with world-renowned specialists such as our friends at Mayo Clinic. Just as important, however, is the passion and compassion our physicians and staff members bring to work every day. We are proud to bring both to our community.

Wishing you good health,
Jon Ness, CEO

KOOTENAI HEALTH

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Andrea Nagel

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Allies for Better Cancer Care

REGIONAL CANCER ALLIANCE LAUNCHES FIRST TREATMENT PROGRAM

Kootenai Health recently joined forces with Providence Health Care and Cancer Care Northwest to provide integrated, comprehensive care for cancer patients in the Inland Northwest. Together the three have formed a regional cancer alliance called InnerPacific Alliance for Cancer Care, LLC.

CARE FOR EVERY PATIENT

The three organizations—the region’s premier health care leaders in cancer services—shared a desire to create a regional cancer alliance aimed at elevating the quality, coordination and experience for cancer patients and their families throughout the region. The alliance was formalized and launched its first initiative—a comprehensive radiation oncology program—this past January.

Through the Alliance outpatient radiation oncology services are now

provided by Cancer Care Northwest. Patients are able to receive comprehensive, personalized radiation oncology services from a single provider that coordinates services at member locations throughout the Coeur d’Alene–Spokane area. Services are available at Kootenai Clinic Cancer Services locations in Coeur d’Alene and Post Falls, as well as six additional locations in Spokane.

RADIATION ONCOLOGY IMPROVEMENTS

The radiation oncology program has a team of experts that includes eight radiation oncologists plus radiation therapists, nurses, medical physicists, dosimetrists and support staff. Altogether more than 65 individuals have come together from the three member organizations to deliver comprehensive, coordinated radiation oncology services.

Patients in northern Idaho will continue to receive this care in

Coeur d’Alene and Post Falls. Now they will have the added benefit of many providers working together on their care.

A COLLABORATIVE MODEL

As the program grows, members of the InnerPacific Alliance for Cancer Care will work together to develop additional cancer programs that will improve access to high-quality, specialized care throughout the region.

“Residents of our region should have access to excellent cancer care, with appropriate options, medical expertise, the best technology and caring support, without having to leave the area,” Jon Ness, CEO of Kootenai Health, said. “We created the alliance to do just that. Patients now have a team of physicians collaborating on their care, greater access to technology and care that is coordinated.”

For more information on the InnerPacific Alliance for Cancer Care and the organizations that have formed the alliance as part of a shared commitment to providing quality services to cancer patients in the Inland Northwest, call **(509) 228-1000** or go to **InnerPacificAlliance.org**.



YOUR ALLIES AGAINST CANCER

The InnerPacific Alliance for Cancer Care is committed to providing quality services to cancer patients in the Inland Northwest. Call **(509) 228-1000** or go to **innerpacificalliance.org**.

Beating the Odds

AFTER BEING DIAGNOSED WITH A RARE TUMOR, GINGER IS ON THE ROAD TO RECOVERY

By Andrea Nagel

We know that regular health screenings are important. Physicals, mammograms, prostate exams and colonoscopies are just a few of the screenings that physicians urge us to get. But for those whose routine screenings come back normal and healthy, it's easy to wonder why it's all necessary.

Ginger Lolley is a healthy 62-year-old who enjoys exploring northern Idaho, gardening and sewing. Despite her positive attitude and great health history, Ginger was recently diagnosed with a rare, progressive tumor in her colon, which was discovered during a routine colonoscopy.

"Ginger's case has been very challenging," David Bartels, D.O., medical oncologist, Kootenai Clinic Cancer Services, said. "Her cancer is one that could affect any of us and has no relation to lifestyle choices or genetics. It can be hard for patients like Ginger, who do things right and are still affected by a difficult disease."

Ginger's diagnosis is a high-grade neuroendocrine tumor of the colon. This type of tumor forms in the hormone-producing cells of the body. These cells have



very specific functions, such as regulating air and blood flow through the lungs and controlling the speed at which food is moved through the digestive tract.

"Within three weeks of my diagnosis, I completed all my testing and started treatment," Ginger said. "All of the people I've encountered along the way have been so kind, considerate, respectful and caring."

MAYO CLINIC EXPERTISE

Because Ginger's cancer is rare, Dr. Bartels sought a second opinion on Ginger's care plan through an eConsult with Mayo Clinic. Kootenai Health is a member of the Mayo Clinic Care Network, which enables Kootenai physicians to connect electronically with Mayo Clinic specialists when they want additional input regarding a patient's care.

"It's helpful to have an academic discussion with an expert specializing in a specific type of cancer,"



Ginger Lolley (right)
with her daughter,
Darby Lolley



Kootenai Clinic
Cancer Services at
KH.org/cancer or call
(208) 625-4700.
Learn more about
Kootenai Health's
membership in
the Mayo Clinic
Care Network at
KH.org/mayo.

Dr. Bartels said. "This discussion and interaction help build both physician and patient confidence in rare and complex situations like Ginger's. The specialist at Mayo agreed with the plan our oncology team put together. This gave us the confidence to move forward with an aggressive approach that was otherwise not clearly defined by the standard treatment guidelines."

Ginger is currently undergoing aggressive chemotherapy to treat her tumor and is so far responding very well. Just a few weeks into treatment, her tumor shrunk in size by half.

"I had no idea Kootenai was a member of the network," Ginger said. "My first impression of Dr. Bartels was that he was a very warm and kind individual. He has been very positive and confident all along, but the fact that Mayo Clinic backed up his plan gave me even more confidence in him and my treatment."

Ginger's daughter, Darby Lolley, has been by her side

each step of the way, helping to manage her mother's treatment schedule.

"I want to be there to support her no matter what's going on," Darby said. "I have been so pleased with the care she has received both at the clinic and at the hospital. Every doctor and nurse has been compassionate and encouraging. And the fact that the Mayo consult came back in support of my mom's treatment plan proved to me that our doctors are good here. It solidified that my mom is in the best hands possible."

Dr. Bartels said families can play an important role in cancer treatment.

"The diagnosis of cancer brings out the best, worst and strongest emotions in patients and their families," he said. "Ginger's family has rallied around her in encouragement and support, which is clearly beneficial. That type of response is the best thing that any of us could hope for when faced with such adversity."



Diabetes Made Easier With Education

WORKING WITH A DIABETES EDUCATOR CAN HELP
ANSWER QUESTIONS AND ALLEVIATE STRESS

By Andrea Nagel

Five years ago Bobbie Brown was diagnosed with type 2 diabetes. She met with her physician in Chico, California, and they came up with a care plan trying various medications, but nothing seemed to help. She couldn't eat anything without feeling terrible and lost over 30 pounds. Feeling discouraged she sought a second opinion from an endocrinologist.

A NEW DIAGNOSIS

After doing several tests, her endocrinologist determined that she actually has type 1 diabetes, which meant a completely different treatment plan would need to be in place to get her back on track.

"Frequently patients with diabetes are frustrated when they have been trying very hard to manage their condition and aren't seeing the results they had hoped for," Breanna Bergeron, Kootenai

Clinic diabetes educator, said. "It's a relief for patients to know that there are many options available when treating diabetes. It is our job to work with the patient to find the one that works best for them and that they can be the most successful with."

Breanna has been working with Bobbie and her husband, Pat, since they moved to northern Idaho a few years ago. Breanna helps Bobbie develop meal plans, dial in her

Bobbie Brown (left) was diagnosed with type 1 diabetes five years ago. She regularly meets with her diabetes educator, Breanna Bergeron (right), to monitor her treatment.

insulin doses, and learn about technology and devices that can help her better manage her diabetes.

“I didn’t know what all was involved in managing diabetes,” Pat said. “We’re so grateful to be able to work with an educator and know how to take this on ourselves.”

Since receiving her new diagnosis, Bobbie said she’s feeling great and can confidently manage her diabetes through careful monitoring and precise insulin dosing.

“Getting diagnosed with diabetes changed everything,” she said. “Before, I ate whatever I wanted and didn’t exercise much. I have to admit, I was a sucker for pies. But now I really think about everything I eat and try to exercise more regularly.”

With each patient, diabetes educators perform a needs assessment. Educators get to know their patient, figure out what they already know about managing diabetes and look at what they still need to work on. From there, they can explore various treatment options, which usually include developing an appropriate eating and activity plan, along with discussing what medications and/or devices may be appropriate for their situation.

Services provided by diabetes educators at Kootenai Clinic include:

- ▶ Education on use of insulin and non-insulin diabetes medications
- ▶ One-on-one diabetes self-management training, as well as group sessions
- ▶ Training on multiple devices, including glucometers, insulin pumps and continuous glucose monitors
- ▶ Medical nutrition therapy
- ▶ Gestational diabetes counseling

“Knowledge is power when it comes to diabetes,” Breanna said. “I always encourage people to not give up when something isn’t working; there’s always another way to treat your diabetes—we may just have to work to find it.”



GET HELP MANAGING YOUR DIABETES or find answers to your questions. Call Kootenai Clinic Diabetes and Endocrinology at **(208) 625-5500** or visit **KH.org/diabetes**.

MARINATED CHICKEN TENDERS

Makes 4 servings.



Ingredients

1 pound chicken tenderloins (or chicken breasts cut into strips)
Season with kosher salt, black pepper, lemon and a pinch of oregano
Bamboo sticks

Directions

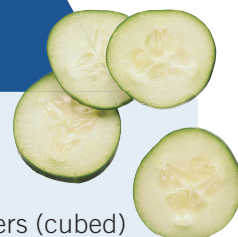
- ▶ Marinate chicken in the seasoning ingredients for 2 to 6 hours (up to 24 hours in the refrigerator).
- ▶ Brush bamboo sticks lightly with olive oil.
- ▶ Skewer the chicken pieces using bamboo sticks.
- ▶ Grill or broil chicken 3 minutes on each side.
- ▶ Serve hot off the grill! Enjoy!

Nutrition information

Serving size: 4 ounces. Amount per serving: 124 calories, 1.4g total fat, 65mg cholesterol, 648mg sodium, 0g carbs, 26g protein.

CUCUMBER-TOMATO SALAD

Makes 4 servings.



Ingredients

1 English cucumber or 2 regular cucumbers (cubed)
2 Roma tomatoes (diced into ½-inch cubes)
½ onion, sweet white or yellow (diced)
½ lemon or 1 lime, juiced
1 to 2 pinches of oregano
Season to taste with kosher salt, black pepper and olive oil (optional)

Directions

- ▶ Combine cucumber, tomatoes and onion in a bowl.
- ▶ Sprinkle with lemon juice and seasonings.
- ▶ Mix lightly.
- ▶ Serve fresh.

Nutrition information

Serving size: ¼ of recipe. Amount per serving: 29 calories, 0.2g total fat, 0mg cholesterol, 580mg sodium, 6g carbs, 1.2g protein.



Bridging the Gap in Africa

ASANTE MINISTRIES HELPS RWANDANS ACHIEVE SUCCESS

By Andrea Nagel

Every once in a while we stumble upon a story of an employee or community physician carrying Kootenai Health's tradition of compassionate care beyond our hospital and clinics. It is through these individuals that our message of community, wellness and caring can be shared across the region and, in some cases, across the world. We hope to share these stories in print and online through our new feature, "Beyond Kootenai." You can read these stories and more on our blog newsroom.kh.org.

Todd Putren, RN, director of critical care at Kootenai Health, and his wife, Kim, have long believed in helping others and have extended their compassion overseas through various sponsorship programs. Their most recent endeavor is through Asante Ministries. The Putren family not only sponsors multiple children through this program, but they decided to participate in a mission trip after being so moved by the objectives of the organization.

RISING ABOVE POVERTY

"The thing I really love about Asante

is their goal of raising leaders for Rwanda to help bring families above the poverty line," Todd said. "These kids are growing up in a two-class society that is divided almost solely based on whether or not you have a college degree."

The Asante program is helping them to achieve that and bridge the gap that is keeping them from succeeding. It was developed in Rwanda in 1999 by former child refugees. After seeing success with the initial child sponsorship program, the organization started the Asante Children's Choir as a living thank-you to those who

participated in the program and to serve as a voice for those children who still needed assistance. Today the choir continues to travel the world to raise awareness and support for the program. Unlike a lot of other organizations, Asante gives 86 percent of all proceeds back to the children of Rwanda, Uganda and Burundi.

"There's something to be said about the Asante leadership," Todd said. "They're doing it right."

BRIGHTER FUTURES

Through Asante and volunteers like Todd and Kim, more than 2,500 children have access to food, shelter and schooling. While visiting Rwanda, Todd and Kim were able to meet the children they sponsor, see the schools and living arrangements created by the program, and learn more about new programs that will help to sustain families.

One project in particular resonated with Todd, and since his trip

Ironman for Anna

FUNDRAISING CAMPAIGN HELPS CHILDREN BATTLING CANCER

By Andrea Nagel

After losing their 7-year-old daughter to liver cancer in 2011, Joe and Polly Schindler started the Anna Schindler Foundation to help support families with children battling cancer. The foundation helps families with the costs associated with travel, emergency expenditures, housing and funeral costs.



Tom deTar, M.D.

“I can’t even imagine facing a diagnosis like that,” said Tom deTar, M.D., from St. Joseph’s Ear, Nose & Throat Clinic, a Schindler family friend. “I felt helpless while Anna was going through

treatment because I wasn’t directly involved in her care. But she was remarkable and heroic—her story really touched me.”

GATHERING MOMENTUM

Dr. deTar wanted to contribute to the foundation and help other children in a situation like Anna’s. He decided to start Ironman for Anna to raise funds.

“I thought if I did Ironman to raise money for the kids, I would accomplish two goals,” he said.

He started his goal amount at \$5,000, thinking even that would be a challenge to achieve. However, he quickly surpassed that amount and with the help of individual donations, he raised nearly \$27,000 by the time race day rolled around. Over 95 percent of all funds raised by the foundation go directly to cancer patients and their families.

Dr. deTar wants to keep the momentum going and has recruited 12 athletes to compete in honor of Anna at this year’s Ironman. The athletes range from an 18-year-old first-time racer to veteran Ironmen and women, including one of Anna’s former nurses.

“My goal is to bring more awareness to the program,” he said. “I hope all the athletes are successful in both fundraising and in completing the race. I would have never done Ironman for myself, but I would do it for Anna and for other kids like her.”

Athletes can compete as an Ironman for Anna in any Ironman event around the world. Learn more or donate to the Anna Schindler Foundation and Ironman for Anna by visiting annaschindlerfoundation.org.



Photos by Kim Putren

he has been recruiting sponsors to help it grow. The “sewing machine project,” as Todd called it, trains 30 individuals (mostly mothers) over the course of nine months to become seamstresses. At the end of the program, 10 of the participants get to keep the pedal-powered machines so they can build a career and support their families. Todd is trying to raise enough money so every participant in the next class will get to keep a sewing machine.

“For just \$150 we can give someone a future—and their family a future,” Todd said. “It’s great to see people in our community getting involved. It’s so easy to get lost in our own day-to-day and forget how lucky we are.”



GET INVOLVED!

Learn how you can help Asante Ministries by visiting asanteministries.org. To contact Todd directly about his experiences, email him at tputren@kh.org.





Training Africa's Next Surgeons

RANDIL CLARK, M.D., TEACHES SURGICAL PROCEDURES IN ETHIOPIA

By Andrea Nagel

In 2005 Soddo Christian Hospital opened its doors in Wolaitta, Ethiopia. The mission for the hospital was to be a training center for medical workers across Africa. Today it is one of only nine surgical resident training sites in Africa for the Pan African Academy of Christian Surgeons.

The program's five-year residencies are modeled after Western medicine and staffed by volunteer physicians and surgeons from the U.S., Canada, Europe, Australia and Korea. Each year, many other physicians travel to Wolaitta to



Randil Clark, M.D.

help develop the program and provide some specialty rotations to the resident doctors' education. "I've been able to go to

Ethiopia twice to teach residents a few urological procedures," Randil Clark, M.D., North Idaho Urology, said. "They actually see a lot of patients with bladder and kidney stones, as well as urethral disease and damage."

Dr. Clark explained that the road conditions and safety in Ethiopia are a hazard for locals. There are many accidents that cause pelvic breaks and fractures which, in turn, can cause damage to the bladder and urethra. Dr. Clark and his team are able to teach some basic endoscopic techniques as well as more complex open surgical repairs.

"Before I went over to teach, I visited the University of Washington in Seattle," Dr. Clark said. "While there I brushed up on my skill set so I was prepared to teach the residents and general surgeons."

There are several procedures that urologists are able to perform in the U.S. that just aren't possible in

Ethiopia for cost and technological reasons. Procedures such as removing a kidney stone have to be done using old techniques. What is a minimally invasive laser treatment here requires an open surgery procedure for the residents at Soddo.

Each time Dr. Clark visits the residents, he stays for 3½ weeks. During his last visit, he was able to work with the residents on 35 cases, including urethral reconstruction, prostate cancer, bladder and kidney stones, pelvic masses, and trauma.

"The thing I like about working with the residents is that I know the skills and knowledge keep going after I leave," Dr. Clark said. "Teaching them to do the procedures carries a long-term effect that will end up helping more people in the long run."



FIND MORE INSPIRING stories online. Visit the Soddo Christian Hospital at soddo.org.



Healing Hearts in Africa

KOOTENAI HEART SPECIALISTS REBUILD CARDIOLOGY SERVICES IN RWANDA

By Andrea Nagel

Every year since 2010, Healing Hearts Northwest—a group of about 35 cardiology specialists from Kootenai’s Heart Clinics Northwest and other local agencies—has been traveling to Rwanda to perform heart valve repair on those suffering from heart disease. The group spends two weeks teaching and mentoring young African physicians while evaluating future areas that need to grow.

RESTORING NEEDED CARE

Rwanda is rebuilding its medical programs after losing more than 75 percent of its providers in the 1994 genocide, which resulted in the destruction of their hospitals and medical schools and the loss



Photo by Josh Goldberg



Photo by Larry Keyser



Lisa Chapman, B.S.N.

of trained medical-support personnel.

Teams from all over the world now coordinate to have quarterly visits with Health

Development Initiative, a Rwandan group of young physicians seeking to develop and grow their medical programs.

“Most of our patients come from the surrounding villages, many walking over three hours to make an appointment,” Lisa Chapman, B.S.N., Heart Clinics Northwest nurse manager, said. “It’s tough for their operating staff to build their skills because they can only practice four times a year, when there’s a team like ours there to supervise and teach.”

Over the course of their two-week visit, members of Healing Hearts Northwest were able to perform surgery on 17 patients.

“We have hundreds of people that want to see us while we’re there, but we can’t see them all in

such a short period of time,” Lisa said. “There’s a small group of patients we can consider. They need to be sick enough to need surgery but not so sick that they can’t have a successful recovery.”

Echocardiographer Debra Bell travels six weeks ahead of the group to get imaging of potential patients. After collecting the imaging, she brings the scans back to Spokane to be reviewed by the team.

“The people of Rwanda are amazing,” Lisa said. “They are so gracious and happy to have us. As a culture they really care for each other. Family members will stay with a patient through the entire process, never leaving their side. Their beautiful country and caring culture will draw you back every time.”



DONATIONS AND VOLUNTEERS

are welcome. Discover more about the invaluable work of Healing Hearts Northwest physicians by visiting healingheartsnorthwest.com.



Cardiology Close to Home

THE HEART CLINICS NORTHWEST OFFICE IN POST FALLS OFFERS QUALITY CARE CLOSE TO HOME

By Andrea Nagel

Just over a year ago, Mardy Hanson of Post Falls suffered from pericardial effusion, or fluid around the heart. Today he is doing well and is able to see a cardiologist in his hometown.

Before being diagnosed Mardy said he struggled with chest pain for a couple of days, but nobody saw what was causing the pain. While in the urgent care office on March 4, 2014, he said he felt weak and like he might pass out. The physician instructed him to lie back on the table to be examined.

“He laid back, let out one big breath and then stopped breathing,” Mardy’s wife, Darlene, said. “It was frightening. The doctor got up on the table and started CPR. His staff called 911, and they took us to the hospital.”

While at Kootenai Health, Mardy was seen by cardiologist Marek Janout, M.D., with Kootenai’s Heart Clinics Northwest. Dr. Janout explained to Mardy that he had a lot of fluid surrounding his heart that would need to be drained. Dennis Cook, M.D., another cardiologist with Kootenai’s Heart Clinics Northwest, performed the procedure the next morning.

“Dr. Janout is my hero,” Mardy said. “He was the only one that thought to check for fluid around my heart, and sure enough that’s what it was. I wouldn’t be here if it wasn’t for him.”

Now, Mardy is able to see Dr. Janout in Post Falls, just a mile away from his home.

“I was having to drive over to Coeur d’Alene for my cardiology appointments,” he said. “But when I asked to see Dr. Janout because he’d done such a good job, the receptionist said that he was now seeing patients in Post Falls. It’s been great to have him close by.”

Not only does Mardy see Dr. Janout at the Kootenai Health Park in Post Falls, but his primary care

physician, Blair Linblad, M.D., is located just across the hall.

“I don’t want to ever move out of this area,” Darlene said. “We have the best care right here—we really do.”



CALL FOR YOUR APPOINTMENT The

Heart Clinics Northwest office is located at 1300 E. Mullan Ave., Suite 900, in Post Falls. Call **(208) 625-5530** and we will schedule your visit.



Post Falls resident Mardy Hanson is able to see his cardiologist at the Heart Clinics Northwest office in Post Falls, Idaho.

COLLABORATIVE PATIENT MANAGEMENT

Understanding the Role of Hospitalists

By Andrea Nagel

Hospitalists are physicians

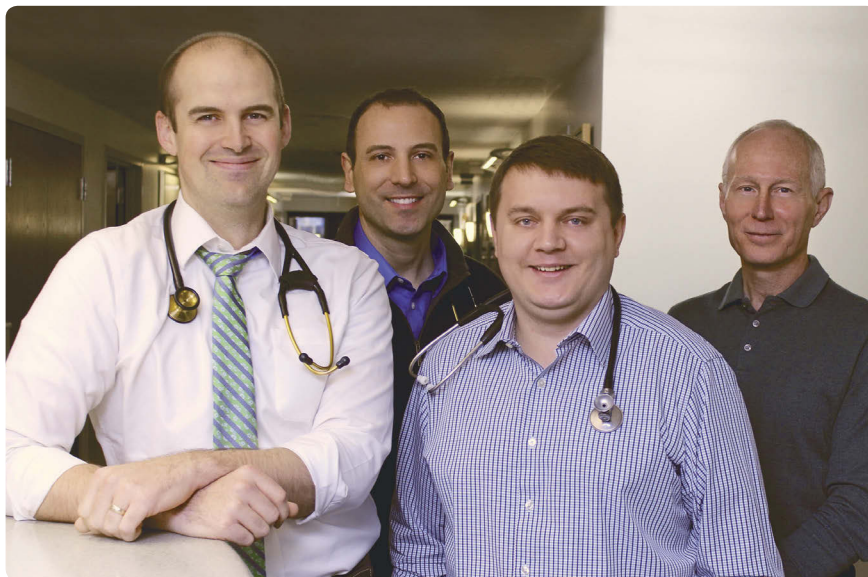
whose primary focus is providing medical care to patients who are admitted to the hospital. On-site hospitalists ensure that nurses and patients have access to an in-house physician around the clock, even on nights and weekends.

“The hospitalist is a relatively new specialty,” Walt Fairfax, M.D., Kootenai Health chief medical officer, said. “It has developed in the past 10 to 15 years as primary care physicians have been unable to manage both their clinics and hospitalized patients.”

CONSISTENT CARE

Kootenai’s hospitalists have internal medicine or family medicine backgrounds, are board-certified and are experienced in the care of acutely ill patients. The biggest benefit to having hospitalists on staff for patients is having direct access to a physician who specializes in inpatient medicine at all times. Hospitalists also stay in contact with their patients’ primary care physicians to help ensure patients are well cared for after leaving the hospital.

Depending on the length of the hospital stay, several physicians may treat a patient while they are in the hospital. Hospitalists work together and collaborate as a team with primary care physicians,



From left: John Siemers, M.D., Mark Dalton, D.O., Benjamin Kartchner, M.D., Tim Weill, M.D.

members of Kootenai’s nursing staff, therapists, dietitians and social workers to provide a consistent level of care and symptom management for each patient.

“Having inpatient care assigned to hospitalists allows primary care physicians to focus on their outpatient care and helps with the flow of patient care at the hospital,” Scott Loss, M.D., hospitalist, said. “We are working with the nurses and staff members every day and are very familiar with the hospital’s best care practices.”

Hospitalists see many patients each day. To provide the highest level of care for all patients, they work closely with advanced practice professionals, such as

physician assistants and nurse practitioners, so all patients can be seen more frequently.

Often after being discharged from the hospital, patients will need to follow up with their primary care physician. Because many patients do not have a family doctor prior to their hospital stay, hospitalists can also work with patients and Kootenai’s social workers to find a doctor to best fit with a patient’s needs, insurance and availability.



LEARN MORE

about the role of Kootenai’s hospitalists, visit

KH.org/medicine.

2014: Moving Toward Our Vision



FINANCE 2014 (UNAUDITED) AND 2013 STATEMENT OF OPERATIONS

Total revenues earned:
\$393 million
\$348 million (2013)

Subtotal operating
expenses:
\$371 million
\$326 million (2013)

Total operating income:
\$22 million
\$22 million (2013)

In 2012 the Kootenai Health board completed a strategic planning process that included an updated vision for Kootenai Health to expand and enhance the health care services provided in northern Idaho. During 2014 Kootenai took several major steps toward that goal. From joining the Mayo Clinic Care Network, to receiving verification as a level 3 trauma center, to breaking ground on a needed expansion, Kootenai's vision became reality. Here are a few of the highlights from our *2014 Community Report* and a look at the good stewardship that is making it all possible for our community.

NETWORK ENHANCES RESOURCES

Kootenai is now a member of the Mayo Clinic Care Network, a national network of like-minded organizations that shares a commitment to better serving patients and their families. As part of the Mayo Clinic Care Network, Kootenai physicians now have access to Mayo Clinic's knowledge and expertise when these additional resources can be helpful, allowing many patients to avoid unnecessary travel for answers to complex medical questions. Like all network members, Kootenai remains a locally owned and independent health care provider.

KOOTENAI HEALTH EXPANSION

In August 2014 Kootenai broke ground on a \$57 million, three-story expansion. The first two floors will include a family birth center, a neonatal intensive care unit (NICU), more patient rooms, a new hospital entrance and registration area, and expanded visitor waiting areas. The third floor will remain unfinished during the initial phase of the project. Once the first two floors are completed and open, the expansion will give Kootenai about a 10 percent increase in patient rooms. At the end of 2014, the foundation and steel framing was completed. The expansion is expected to open in spring 2016.

KOOTENAI CLINIC

Kootenai Clinic continued to grow and expand its services throughout 2014. Kootenai Clinic now houses 18 specialties, 96 physicians and 39 advance practice professionals.

STANDARD & POOR'S 'A' RATING

Standard & Poor's Ratings Services gave Kootenai an 'A' rating based on an evaluation of Kootenai's business plan, credit, cash on hand and decision not to use its ability to levy taxes for funding. The rating is a strong affirmation that Kootenai's business model is stable and seeing positive growth in patient trends.



GET THE FULL REPORT Read Kootenai Health's complete *2014 Community Report* at KH.org/about.



July 2014



August 2014



September 2014



November 2014



January 2015



March 2015

Expansion Exterior Completion in Sight

Bit by bit the Kootenai Health expansion project is coming together. As Kootenai has grown its services to care for the patients and families of northern Idaho, patient volumes have grown. Additional space is needed to accommodate patients and make room for improvements to the existing facility.

Exterior work on the southern half of the building should be finished by late summer.

“Lots of activity will be surrounding the building at that time, mainly in the form of materials going into the building for interior work,” Derek Miller, construction manager, said.

An information system coming with the new building will help the patient and nurse stay up-to-date on the patient’s condition via the patient’s television screen.

“It will tell patients about the staff members that are caring for them and provide some patient education,” Derek said. “It will also display when and what medications they recently received.”

A team of designers and architects has chosen all of the interior materials, and the process of constructing the interior and prepping it for furnishings has begun. Shades of gray, blue and

green will help create a calming atmosphere.

“The main idea is to bring the outside in and keep open views,” Derek said.

Through the summer months, attention will turn to the north end of the building while crews work on the lobby and prep for the parking lot resurfacing and drainage improvement.



FOLLOW OUR PROGRESS at KH.org/expansion and on our Facebook page, facebook.com/kootenaihealth.

Your Colon Cancer Team

KNOW THE ROLES OF THE PHYSICIANS INVOLVED IN YOUR CANCER CARE

By Andrea Nagel

Colon cancer is the third most common cancer (excluding skin cancers) diagnosed in both men and women in the U.S. With a 1 in 20 chance of contracting colon cancer, you or someone you know may be affected by it. Because of its commonality, it is important to have the right team on your side.

“Colon cancer is actually a common and preventable disease that can be treated if caught early,” Gavin Young, M.D., Kootenai Clinic Gastroenterology and Endoscopy, said. “Because of its slow progression and well-defined precancerous stage, it’s typically easy to find in the early stages if you get regular screenings.”

While many family care physicians and other specialty physicians provide screenings, Dr. Young suggests getting one from a gastroenterologist to ensure quality.

“A colonoscopy is pretty operator-dependent,” he said. “A gastroenterologist’s focus is on how often we’re actually catching lesions and polyps during our screenings. Here at Kootenai, we’re ahead of the national average for detection rates, which means we’re providing a quality service to our patients.”

If cancer is detected by either a primary care physician or gastroenterologist, patients begin working with a team of specialists to help them through the treatment process.

MEET YOUR TEAM

When it comes to colon cancer, the main role of a gastroenterologist is early detection and prevention. Offering important screenings; removing lesions, polyps and adenomas; and encouraging patients to make healthy lifestyle choices is the gastroenterologist’s primary job. However, they frequently discover a cancerous polyp or tumor through these preventive screenings.

“Usually, if we find colon cancer from a regular colonoscopy, it is at a very early stage,” Dr. Young said. “The colonoscopy is one of the most important screenings we can do, due to its ability to look at the entire colon.”

Once cancer is detected, patients are typically referred to a surgeon to determine the cancer stage and create a treatment plan.

“The primary treatment when it comes to colon cancer is surgery,” Robert Holman, M.D., Kootenai Clinic General Surgery, said. “Often we will refer the patient to an oncologist for chemotherapy following their surgery.”

Dr. Holman said he typically spends about 45 minutes with new patients going over test results and completing a full medical history and physical. The main goal of these initial appointments is to determine the staging—how advanced the tumor is.

“Some patients may not need surgery,” Dr. Holman said. “If it isn’t too advanced, we can simply remove the



polyp or tumor. If it is in advanced stages, it sometimes does more harm than good to remove part of the colon. For surgery, we're looking for a tumor at an appropriate stage for removal, where the patient will recover enough to undergo cancer treatment successfully."

It takes between four and eight weeks for the typical patient to recover from surgery. From there, many patients will start seeing an oncologist for chemotherapy.

Chemotherapy may be needed for about six months following surgery. The treatment is usually very tolerable, and many patients continue on with their jobs and daily life while undergoing treatment.

"Modern chemotherapy is more effective and more tolerated than it used to be," Kevin Mulvey, M.D., medical director of Kootenai Clinic Cancer Services, said. "Before, patients who were diagnosed with stage IV colon cancer could expect to live only about six months if they received chemotherapy. That has since been extended to about two years."

Undergoing chemotherapy in addition to surgery reduces cancer reoccurrence up to 50 percent. In addition to regular treatments, patients also have the option to participate in medical research and explore different treatment options. For example, Kootenai currently has access to two clinical trials for colon cancer.

One trial is studying the effects of three months of chemotherapy treatment versus the usual six months of treatment. The hope is that three months of therapy will have the same effect on the cancer but with fewer side effects.

Another study is looking at the use of two oral medications for patients who have had precancerous adenomas. This study is looking to see if these medications could be used to prevent the development of additional adenomas and colon cancer in patients who are considered high risk.

Both studies are safe for patients and are monitored closely by Kootenai Clinic staff and physicians.

WHAT DO THEY MEAN?

- ▶ Adenoma—a benign (not cancerous) tumor formed from glandular structures in body tissue
- ▶ Lesion—a region in an organ or tissue that has suffered damage through injury or disease, such as a wound, ulcer, abscess or tumor
- ▶ Polyp—a small growth, typically benign, growing from a mucous membrane, such as the lining of the colon
- ▶ Tumor—a swelling of a part of the body, caused by an abnormal growth of tissue, whether benign or malignant (cancerous)

All three physicians agree: The key to treating colon cancer successfully is catching it in its early stages, ideally catching any precancerous lesions or polyps during screenings. Regularly scheduled colonoscopies are recommended for men and women over the age of 50 based on medical history.

HAVE YOU BEEN SCREENED? Do you have questions about colonoscopies or do you have a history of colon cancer in your family? We can help. Contact Kootenai Clinic Gastroenterology and Endoscopy at **(208) 625-4595**.



Physicians from left to right: Marcus Torgenson, M.D., Robert Holman, M.D., Michael May, M.D., Timothy Quinn, M.D., Edward DeTar, M.D., Harold Preiksaitis, M.D., Tim Doty, P.A.-C., Susan Hildebrandt, A.R.N.P., Michael James, M.D., Stanley Toelle, M.D., Gavin Young, M.D., Jim McMahon, P.A.-C., David Bartels, D.O., Kevin Mulvey, M.D., Kevin Kim, M.D.





Eat Well, be Well on Vacation

TIPS FOR MAKING SAFE, NUTRITIOUS CHOICES ON THE ROAD

Taking it easy is one of the best parts about a vacation. But while the rest and scenery may do you some good, the same can't always be said of the food—especially when you're driving to your destination. Think empty-calorie, gas station munchies.

And that could spell trouble when you're watching your waistline or trying to eat a healthy diet. Also the risk of food poisoning—a would-be vacation spoiler—rises in summertime. So you'll also want to keep foods safe while you travel.

FIVE TO REMEMBER

Before you hit the road, take these tips in tow:

1. Pack some healthy snacks. Nutritious, portable foods include whole-grain crackers, fresh fruit (washed ahead of time), peanut butter sandwiches, precut veggies, wasabi peas, dried mixed fruit, unsalted nuts or popcorn, and even canned or packaged tuna.

2. Cool it. If you bring a cooler, pack plenty of ice or a frozen pack. Try to keep the cooler out of the hot trunk. Put a refrigerator thermometer in the cooler to make sure the temperature inside stays below 40 degrees—the safe zone for foods.

3. Choose wisely. If you do stop for a bite, eye the menu for healthier options. Good choices include low-fat smoothies; grilled chicken breast sandwiches; and salads, baked potatoes and veggie-based dishes.

4. Wash up. Remember to scrub your hands with soap and water before preparing and eating food. Don't forget to pack some sanitizer for when you can't get to a sink.

5. Know when to toss it. You might picnic at parks, grill at campgrounds or take restaurant food to-go. If you do, don't eat anything that's been sitting out for more than two hours—or one hour on a 90-degree or hotter day.

Source: American Academy of Nutrition and Dietetics

Inside Kootenai

HOW CAN I STAY HEALTHY WHILE TRAVELING THIS SUMMER?



GAIL ANDERSON, P.T., O.C.S., PHYSICAL THERAPIST

When on vacation schedule time for exercise—shoot for at least 45 to 60 minutes a day. Try to book a hotel with a gym and use it for your exercise session—it doesn't have to be grueling, just moving. Plan to walk to most places within a mile or so, which can count for exercise. Plan fun activities for the whole family, like swimming, snorkeling, football or volleyball.

On a long car ride, take every opportunity to get out, stretch and move. When you are at a gas station, get out and do squats, jumping jacks or fender push-ups. Take short walks at rest areas, especially if they have a walking path or grassy area.

SUSAN PRUITT, R.D.N., L.D., DIETITIAN

My family and I enjoy vacations that include lots of activity, such as walking, hiking and biking, so we engage in some sort of physical activity most days. During long car rides we stop every couple of hours for a short walk to stretch our legs. Any activity is better than no activity! We often take our own snacks, such as trail mix, fruit and granola bars, to avoid getting caught in the not-so-healthy options at the next gas station. We tend to allow ourselves to have one meal per day that we indulge in, but even then we will share a meal or watch our portion sizes of high-calorie foods.



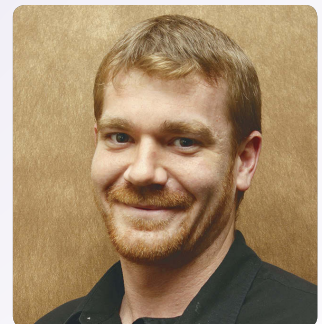
AMY WARD, R.N., INFECTION PREVENTION COORDINATOR

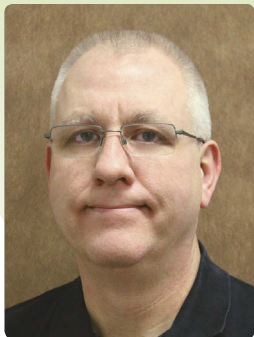
To stay healthy when traveling, always make sure to wash your hands frequently with either soap and water or alcohol hand sanitizer. Be sure to check the Centers for Disease Control and Prevention travel website for vaccination suggestions. It allows you to select both your destination and your health status to determine what vaccines you may need to ask your health care provider about. It also gives other important tips for staying healthy in specific destinations. There is also a fun app called "Can I Eat This?" that will help you avoid traveler's diarrhea.

JUSTIN WEBER, R.P.S.G.T., SLEEP TECHNICIAN

Jet lag can be a real concern for travelers who may be changing time zones. Your body has natural biological clocks called circadian rhythms that can be influenced by a change in time zones. Many of your body's biological conditions are influenced by sunlight, which lets you know when to sleep and when to wake. When you change time zones, your clock can take several days to adjust. Here are some simple ways to help:

- ▶ Change your sleep and wake time several days before the trip.
- ▶ Change your watch to the destination time zone before you fly.
- ▶ Decrease caffeine intake.
- ▶ Select a flight with an earlier arrival time and set a later bedtime.
- ▶ Stay hydrated.





GAVIN YOUNG, M.D.,
GASTROENTEROLOGIST

Q What is a gastroenterologist?

Gastroenterologists are doctors who help patients with disorders or diseases of the pancreas, liver, gallbladder, esophagus, stomach, small intestine and colon.

Kootenai Clinic's gastroenterology physicians are specially trained and provide a wide range of services with state-of-the-art equipment, electronic medical records and digital imaging.

Q What is a colonoscopy?

A colonoscopy is an outpatient procedure used to examine your colon and rectum. Colonoscopies are most frequently used to:

- ▶ Look for and remove polyps
- ▶ Look into causes of abdominal pain, rectal bleeding or other changes in intestinal health
- ▶ Screen for colon cancer

Q What is a polyp?

A polyp is an abnormal growth projecting from a mucous membrane in the colon. If a polyp is detected during a colonoscopy, it will be removed and examined for cancer. While not all polyps are cancerous, some may lead to colon cancer.

Q Why choose our gastroenterologists?

The quality of your colonoscopy is directly related to the number of polyps or cancer threats detected.

Our specially trained and board-certified gastroenterologists:

- ▶ Find 16 percent more polyps in men and 13 percent more polyps in women than the national average
- ▶ Have a 99.4 percent rate of cecal intubation (a measure ensuring a thorough colonoscopy)—9 percent higher than the national average
- ▶ Perform colonoscopies that increase the likelihood of early cancer detection and prevention

Colorectal cancer is the second leading cancer in the U.S. and is preventable and treatable. Committing to a colonoscopy as part of your regular screenings after age 50 greatly reduces your chance of developing colorectal cancer.

To learn more about gastroenterology at Kootenai and meet the team, turn to page 18.



NEED TO SEE a gastroenterologist?
Call Kootenai Clinic Gastroenterology and Endoscopy at **(208) 625-4595**.

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, June 2 to 23,
6 to 8:30 p.m.

Thursdays, June 4 to 25,
6 to 8:30 p.m.

Tuesdays, July 7 to 28,
6 to 8:30 p.m.

Thursdays, July 9 to 30,
6 to 8:30 p.m.

Tuesdays, Aug. 4 to 25,
6 to 8:30 p.m.

Thursdays, Aug. 6 to 27,
6 to 8:30 p.m.

Bringing Baby Home | \$15

Monday, June 1, 6 to 9 p.m.

Saturday, June 27, 9 a.m. to noon

Saturday, Aug. 1, 9 a.m. to noon

Breastfeeding Basics | \$15

Wednesday, Aug. 5, 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

Aquatics Classes | Varies

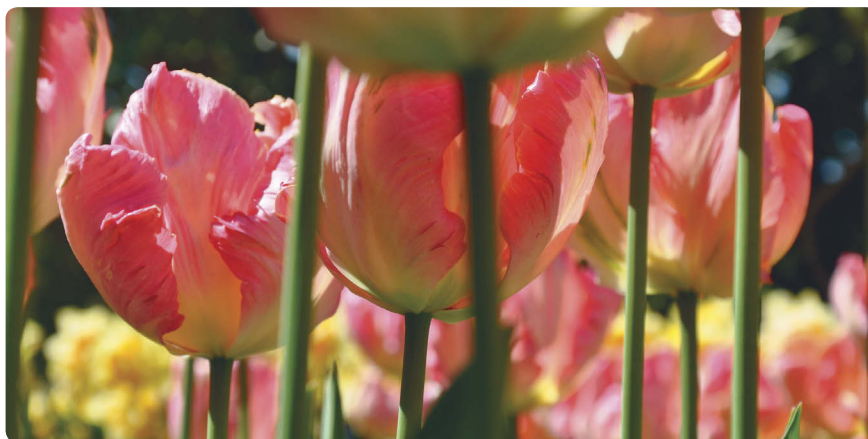
Weekdays

McGrane Center pool

Formats, times and prices vary.

Call **(208) 625-5356**, 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) 619-4138**.

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 **(509) 723-8258**.

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) 625-4690**.

Follow Us



DISCOVER MORE

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



*Fly fishing
Richard Palmer*



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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



KootenaiClinic