

# Kootenai Health

ISSUE 3 | 2015

## With a little help from our funds

Cindy Fabianski found  
support to cope with the  
costs of cancer.



KootenaiHealth



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*\*Note: Surgery discount is available for physician fees only, anesthesia and facility fees cannot be discounted.*



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## KOOTENAI HEALTH

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83814

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# Opening Thoughts

## HELPING AT HOME



Jon Ness, CEO

As this issue of *Kootenai Health* magazine went to press, northern Idaho was celebrating the successful completion of another Ironman triathlon—this year in record-breaking heat. Since Ironman's first year in Coeur d'Alene, Kootenai Health has sponsored and helped staff the medical tent that serves the Ironman athletes. This not only provides a place the athletes can receive aid; it also helps ensure the hospital

emergency department has open rooms available to continue caring for our community.

Kootenai Health has a long history of giving back to our community, from staff volunteering at community events to monetary donations made to groups working to improve health and wellness in our community. We are also pleased to come alongside our patients to help them connect with additional resources.

In this issue of *Kootenai Health* magazine, you'll read about clinical trials that are helping patients here at home, and financial support that is finding its way from national organizations to local patients in need. We have also included a few of the ways you can give back to help in our community, whether it's a donation to the Kootenai Health Foundation's cancer patient support fund, or by spending a few hours a week volunteering at the hospital.

Giving to others is one of the greatest privileges in life. Whether you exercise this privilege by sharing a financial contribution, your time, knowledge, or even a kind word—thank you! Together we are making a community we can all be proud to call home.

Wishing you good health,  
Jon Ness,  
CEO, Kootenai Health



# Using Research to Improve Treatment

THE MAYO CLINIC CARE NETWORK IS WORKING TO IMPROVE COLLABORATION

By Andrea Nagel

**Kootenai Health** is participating in a research study by the Mayo Clinic Care Network. The study, called the Statin Choice Implementation Project, is designed to study the effects of physicians and patients working together to make medical decisions. This particular project focuses on the decision to start taking statin (cholesterol-lowering) medication to prevent cardiovascular events like heart attacks.

The study was prompted by changes in clinical guidelines that recommend when cholesterol medication should be used to reduce the risk of heart attack in patients with certain risk levels. The new guidelines are controversial because they suggest a risk cutoff level that patients and physicians (including leading experts) may not agree with. Under the study, physicians involve patients in the decision-making process by informing them about their heart attack risk level without a medication and how that risk might change if they choose to start taking one.

The medical community is calling this approach to making decisions together “shared decision making.”

“The study is also assessing current attitudes about

shared decision making,” said Ryan Gilles, M.D., Kootenai Clinic Family Medicine Coeur d’Alene Residency and physician leader for the Statin Choice Implementation Project at Kootenai. “As we use and integrate this approach in our care model, we’ll be able to track changes in what our patients and physicians think about collaborating on health care decisions.”

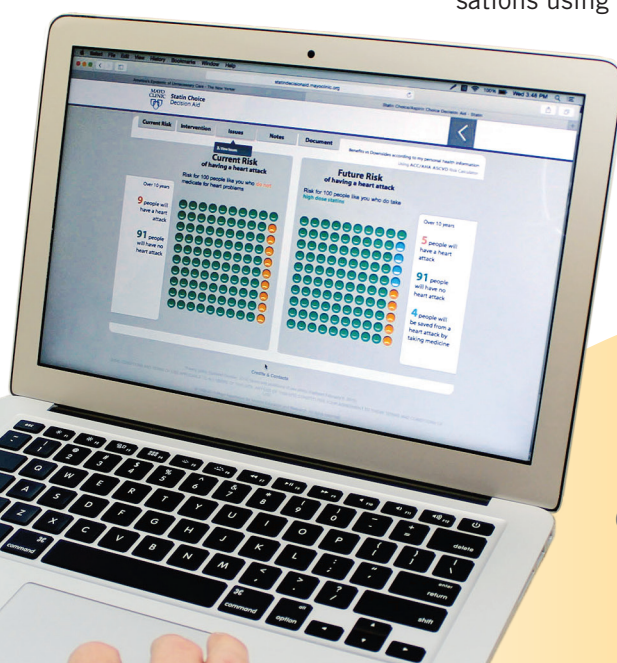
Over the next two years, all of Kootenai’s primary care clinics will implement a new tool, called the Statin Choice Decision Aid, into their routines. The web-based tool displays a patient’s individual risk of having a heart attack both with and without a statin medication. It displays this information visually in a way that patients can easily view and understand. The goal of the tool is to encourage patients and their physician to have meaningful discussions about whether starting a statin is appropriate or not.

“We are really excited to have Kootenai partnering with us in this project,” said Victor Montori, M.D., lead developer of the Statin Choice tool and principal investigator for the study. “Patients and physicians everywhere are struggling with whether to start a statin medication to prevent heart attacks and strokes.

Kootenai is figuring out how to improve these conversations using the Statin Choice tool. This could

help improve the quality of preventive care for a lot of people.”

Ryan Gilles, M.D., demonstrates the Statin Choice Decision Aid at the Kootenai Clinic Family Medicine office in Coeur d’Alene. The tool shows a visual representation of the risks and benefits of taking statin medication to prevent heart attacks.



 **PARTNERS IN CARE** Learn more about Kootenai Health’s involvement with the Mayo Clinic Care Network at [KH.org/mayo](http://KH.org/mayo).





# With a little help from our funds

CINDY AND HER FAMILY RECEIVED SOME MUCH-NEEDED FINANCIAL SUPPORT FROM TWO FOUNDATIONS

*By Andrea Nagel*

**Shocked only begins** to describe the mountain of emotions Cindy Fabianski was faced with on July 31, 2013, after being diagnosed with stage IV breast cancer. With regular yearly screenings and no family history, breast cancer was the last thing Cindy expected after a visit with her primary care physician.

“I went to the doctor because of some severe back pain that wasn’t getting better after seeing my chiropractor and doing physical therapy,” she said. “I joked with my husband as I left to get my imaging results, saying, ‘You don’t need to come with me—it’s not like I have cancer.’ It was the last thing I expected.”

Cindy’s cancer had metastasized to her bones, causing severe pain and limiting her movement. After her diagnosis, her physician referred her to Kootenai Clinic oncologist Kevin Kim, M.D., for further evaluation and treatment.

“When Cindy was diagnosed in 2013, her mammogram showed an

abnormality in her right breast,” Dr. Kim said. “However, her mammogram in 2012 was normal, so it’s possible that her cancer started after the 2012 mammogram. Another possibility is that there was a small cancer in 2012 but the screening did not detect it. Having dense breast tissue can lower the sensitivity of the mammogram.”

Although other screening options are available, Dr. Kim explained that there is no evidence that they provide any additional benefit. Current guidelines do not recommend any other breast cancer screenings for women with an average risk. Dr. Kim did say that if someone has a family history of breast or ovarian cancer, he would recommend receiving an MRI in addition to regular mammograms.

## **HELP IS AVAILABLE**

After Cindy’s radiation treatments, the pain in her bones began subsiding and she eased back into her daily routine before beginning chemotherapy.

“I am so grateful for the support





## DONATE TO THE CANCER PATIENT SUPPORT FUND

Contact the Kootenai Health Foundation at **(208) 625-4438** or visit **[KH.org/foundation](http://KH.org/foundation)** for more information.

of my family, my church and the staff at Kootenai,” Cindy said. “It’s so much easier to come in for treatment when you feel like everyone there knows you and genuinely cares.”

Even though Cindy found herself surrounded by physical and emotional support, she and her husband, Frank Fabianski, struggled to keep up financially once Frank left his job to help care for Cindy. With monthly bills and medical bills adding up, Cindy sought assistance with the help of Maggi McElfresh, a social worker with Kootenai Clinic Cancer Services.

With Maggi’s help, Cindy applied for two grants to offset some of the costs of treatment. Cindy received the Susan G. Komen Cancer Patient Support Grant as well as assistance from the Kootenai Health Foundation’s Cancer Patient Support Fund. These grants are funded through the Susan G. Komen Foundation as well as generous community donations.

“Cindy has a wonderful, gentle spirit and has taken her diagnosis and treatment in stride with grace and resiliency,” Maggi said. “The Komen grant that provided the funds is used for women and men diagnosed with breast cancer. Together we completed a brief application; it takes very little time but has a large impact for those that need it.”

The Cancer Patient Support Fund was established by the Kootenai Health Foundation to help local cancer patients and their families pay for daily living

expenses while undergoing treatment.

“Receiving these grants allowed us to catch up on bills while my husband was between jobs,” Cindy said. “I am so thankful to live here and have access to the level of care that’s available. Everyone has been so kind and helpful. The billing department has helped to combine some of my bills and work on a plan to pay over time.”

### GIVING BACK

Today Cindy is able to manage her cancer with daily medication and gets regular screenings to monitor

potential tumor growth. She plans to attend this year’s Race for the Cure for the first time since her diagnosis.

“My daughter has participated in the race for the past two years; I wasn’t feeling well enough to join her last year,” Cindy said. “But this year I’m hoping to walk with her and give back a little to all of those who have supported me.”



## SUPPORT LOCAL CANCER PATIENTS

You can help support local cancer patients like Cindy Fabianski by attending these upcoming events. Be sure to visit the Kootenai Clinic booth to learn more about our services and ways to support patients and their families.

### Chicks ’n Chaps

*Friday, August 28*

**1 to 5:30 p.m. at the North Idaho Fairgrounds**

Join us for the seventh annual women-only rodeo clinic. Proceeds will benefit the Fair Foundation and Kootenai Health Foundation.

Learn more and register at **[northidahofair.com](http://northidahofair.com)**.

### Race for the Cure

*Sunday, September 20*

**9 a.m. at North Idaho College**

Learn more and register for the 10K, 5K or 1-mile events at **[komenidaho.org](http://komenidaho.org)**.



# Building a NeST

THE NEONATAL TEAM AT KOOTENAI HEALTH IS WORKING HARD TO PREPARE FOR THE NEW NICU

By Andrea Nagel

**Early next year**, the doors to the new neonatal intensive care unit (NICU) will open for the first time, ready to start treating newborns with increased needs for intensive care. Because this is a new program, neonatal medical director Kathleen Webb, M.D., hand-picked individuals to create a neonatal stabilization team (or NeST) that will respond to cardiorespiratory emergencies involving newborns up to 1 month of age.

“It’s been a multiyear process to make sure everyone is ready,” said Cassy Oddy, birthing center charge nurse. “Not only did we need to develop the team and the tools, but then we trained our current employees and each new hire. We hold special training sessions and simulations to keep everyone up to speed.”

Although the NeST team is helping to prep for the transi-

tion, most of their work involves preparing staff in the skills needed to stabilize any emergency in the delivery room. The core team that developed the program consists of Cassy as well as Dr. Webb, Kristie Hiiva, neonatal intensive care nurse; Rob Skinner, respiratory therapist; and Althea Davis, clinical educator. Together, they met for over six months outside of work hours to develop the protocol, tools and simulations needed to train staff.

“They’ve taken the idea I presented to them and run with it. I relate them to a NASCAR pit crew,” Dr. Webb explained. “Everyone jumps into position as soon as they’re needed. It’s like a dance; everyone has a role, place and knows exactly what everyone else is doing at any given point. When you’re working to save an infant’s life, every second matters.”

Although they frequently reference themselves as the NeST team, Rob explained that the term is for anyone that received special training; is serving in the roles of neonatal intensive care nurse, labor and delivery charge nurse, and respiratory therapist; and is scheduled to be part of the response team for a particular shift. No matter where the emer-

gency takes place throughout the hospital, this team will respond.

“There’s nothing else like this here,” Rob said. “This is the first time we’ve had a multidisciplinary team work together to develop a program. We’re hoping this model will spill over into other departments. It’s a unique opportunity to partner and collaborate with others—it has increased our teamwork, communication and respect we have for each other as professionals.”

Dr. Webb’s core NeST team travels throughout northern Idaho to help prepare rural hospital staff to resuscitate infants. They also partnered with the Idaho Simulation Network and JoDee Anderson, M.D., from the Oregon Health and Science University to provide simulation-based neonatal resuscitation training. This allows the team to stay in Coeur d’Alene and watch a live feed of another team’s simulation scenario. They can then offer suggestions to help improve the quality of care for newborns and premature babies throughout our region.

“I see this team that’s improving care and processes across medical disciplines and the region, and I admire them,” said Dr. Webb. “Of all the things I’ve done at Kootenai Health, this is what I’m most proud of.”



Rob Skinner, Cassy Oddy and Kristie Hiiva practice neonatal resuscitation on a simulation mannequin.



## BEST FOR MOM AND BABY

You can learn more about neonatal services at Kootenai Health by visiting [KH.org/neonatology](http://KH.org/neonatology).

Are you currently looking for an OB-GYN? Contact Kootenai Clinic OB-GYN at (208) 625-4970.

# Designed for Patients

THE KOOTENAI HEALTH EXPANSION IS ON SCHEDULE TO MEET ITS GOAL OF PROVIDING COMPASSIONATE CARE FOR THE REGION

By Katherine Ness

**Kootenai Health's** vision to emerge as a regional medical center is becoming more visible every day. Phase 1 of the new expansion is two-thirds complete. The patient-centric design includes a convenient drive-up entrance leading into a modern and comfortable lobby and reception area, which extends into the Family Birth Center. The orthopedic department will be located on the second level, accommodating the fastest-growing procedures in health care—knee and hip replacements for aging baby boomers.

The exterior of the building is finished with light blue, grey and white metal panels that create a modern mosaic that complements the existing blue. Sandstone and glass are incorporated to harmonize with the older parts of the hospital. All patient rooms face outside to bring in natural light.

“The new patient rooms are 40 percent larger with full amenities for patient education, communication and entertainment,” said Jeremy Evans, vice president of operations. “There are peaceful healing gardens and courtyards for patients, guests and employees.”

The new Family Birth Center design is more intimate and private, with nursing stations positioned between two patient rooms to provide more efficient care. Mothers and babies will be able to stay together throughout their time in the hospital.

“Five years ago we didn't even have a neonatal intensive care unit (NICU),” said Kimberly Judd, M.D., neonatologist. She explained that the new neonatal unit



The Kootenai Health administration toured the new facility for the first time last April. The expansion will include a new neonatal intensive care unit and Family Birth Center and a floor dedicated to orthopedic surgery patients, and it will create space in the existing facility to enlarge the main operating room and the emergency department.

will increase from a current level 2 special care nursery to a level 3 NICU. “We will be able to provide care for infants at 28 weeks and 1,000 grams, about 2.2 pounds.”

The mission of Kootenai Health is to provide compassionate care for the region. As Kootenai grows to accommodate a regional population, additional space is needed to properly care for these patients and make room for improvements to the existing facility.

“This expansion is a strong indicator of the need for an increased level of services,” said Jon Ness, Kootenai Health CEO.

The project is on time and on budget with an expected opening date in the spring of 2016. Several community and patient events are being planned to celebrate. Phase 2 will include the emergency department on the south side of the existing hospital and an expansion of the main operating room.



**FOLLOW OUR PROGRESS** See updated photos of the expansion project online: Visit [KH.org/expansion](http://KH.org/expansion).



# Meet our new physicians



*It is exciting and humbling to be **CONTRIBUTING** to the greater good through my participation in research.*

**JEFF ALLEN, M.D.**  
Medical Oncologist,  
Kootenai Clinic  
Cancer Services



## Tell us a little bit about you and your family.

Though my wife and I are native Californians, our academic and professional lives have brought us opportunities to live in upstate New York, western Tennessee, rural northern California, and now the Inland Northwest. Along the way, our family has grown with the addition of our son (age 10) and our daughter (age 6). With our extended

family stretching from the Puget Sound to the desert southwest, we feel that northern Idaho is the perfect location for our family to settle down.

## Why did you pick your specialty?

My interest in hematology and oncology started while I was an undergraduate studying biochemistry and molecular biology and grew stronger while I was in medical school. By the

time I started my internal medicine residency, I had already decided that I was destined to continue my training with a fellowship in hematology and oncology. From the fascinating inner workings of cancer cells to the never-ending stream of advances in clinical care, hematology and oncology is a field that is constantly evolving. It is exciting and humbling to be contributing to the greater good through my participation in clinical research, while hugely fulfilling to be taking care of patients who are on their way to recovery following a cancer diagnosis.

Primary care providers

## A GOOD-HEALTH MUST-HAVE

One of the best things you can do for your health is to have an ongoing relationship with a primary care doctor, experts say.

In fact, people who see a primary care doctor regularly have better health outcomes, lower

death rates and lower total costs for health care than people who don't routinely see a doctor, according to the American Academy of Family Physicians.

A primary care doctor is the lead person on your health care team. He or

she helps you prevent disease and maintain good health.

Your primary care doctor is able to diagnose and treat a wide variety

of illnesses. When more specialized care is needed, he or she works with other types of doctors, such as the specialists featured here.



**FIND YOUR OWN PRIMARY CARE PROVIDER** Call the appointment center at **(208) 625-6767**.

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

Facing a diagnosis of cancer can be a daunting experience, and I want my patients to know that their treatment team will be with them at every step of the way on their journey. As a physician, I believe strongly that one of my most important duties is to educate my patients about their diagnosis and about the treatment options that are available to them. I strive to make sure my patients have a good understanding of their disease and of the treatment options available to them. I want my patients to feel that they are equal partners in the care that they receive.

## What are some of your hobbies?

Our family enjoys the great outdoors, be it hiking, biking, playing sports, etc. With two young children, it is rare for us to not be occupied with some sort of game or activity. When I do have time, I enjoy photography and look forward to the beautiful landscapes and sunsets of northern Idaho.

## What drew you to Kootenai Health?

During my visits to Kootenai Health, the dedicated staff and

top-notch facilities amazed me. Kootenai Health has a robust clinical research program and a long track record of outstanding patient care. Kootenai Health collaborates with the Mayo Clinic Care Network, which ensures that patients can receive national expert second opinions from the comfort of their hometown cancer center. When I was looking for a new opportunity, Kootenai Health stood head and shoulders above the crowd as a program which delivers big-city cancer care with a small-town feel. When coupled with the natural beauty and abundant activities in northern Idaho, it was an easy decision for our whole family.

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### CLIFF HAMPTON, M.D.

Neurologist  
Kootenai Clinic Neurology



## Tell us a little bit about you and your family.

My wife, Rebecca, and I have been married for



*I enjoy the OPPORTUNITY to help people with neurological problems that affect them in profound ways.*

about 12 years. We have three energetic boys, ages 9, 6 and 3. Rebecca grew up in Wyoming and Oregon, and I'm from Utah. We met, dated, were married and finished college in Utah, then moved to Houston for medical school (Baylor College of Medicine), then to Denver (University of Colorado) for my neurology residency.

## Why did you pick your specialty?

The human nervous system is as fascinating as it is complex. When things go wrong, it can cause all sorts of problems—from numbness and tingling to drastically changing one's personality and everything in between. Our understanding of the brain and the rest of the nervous system is so limited. The more we learn the more we realize we really don't

know. In the field of neurology, I enjoy doing what I can to help people with problems that affect them in profound ways.

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

I listen to patients' concerns and I always try to explain things so that everyone understands the situation and what the next steps are. I believe in shared decision making, where patients are informed about their options and guide their own care with the assistance of their physician.

## What are some of your hobbies?

We like doing anything that we can do together as a family—even grocery shopping. We especially enjoy long walks where the boys can explore while Rebecca and I have a chance to talk. We also have fun watching cheesy musicals with a big bowl of popcorn.

## What drew you to Kootenai Health?

Rebecca is excited to return home to the

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## MEET OUR NEW PHYSICIANS

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Northwest, and after eight years of feeling like a fish out of water in big cities, I'm excited to return to a smaller community closer to the size in which I grew up. The first time we visited, it immediately felt like home to both of us. Kootenai Health is just the right size, I like the feel of the community medical system, and it looks like a neurologist is really needed in the area.

### JONATHAN LINTHICUM, M.D.

Orthopedic Surgeon,  
Kootenai Clinic  
Orthopedic Surgery



#### Tell us a little bit about you and your family.

My wife is a physical therapist, though she

currently is working as a full-time mother to our two young daughters at home.

#### Why did you pick your specialty?

My father is a high school industrial arts teacher. I grew up spending quite a bit of time in his woodshop and knew I wanted to work with my hands in some way in my profession. As a pre-med student in college, I had the fortunate opportunity to go on a mission trip to the Dominican Republic and assist in orthopedic surgery there. I knew I had found my calling.

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

I enjoy listening to and getting to know my patients. I feel that my job is really to communicate with patients so that they can make the best decisions for their health.

#### What are some of your hobbies?

My wife and I enjoy hiking, snowboarding, mountain biking, aviation and fishing. We also enjoy

serving on short-term overseas mission trips.

#### What drew you to Kootenai Health?

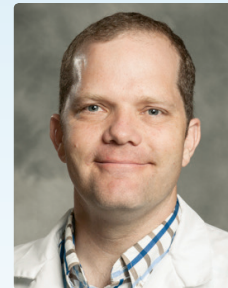
I went to college in the Northwest and have always hoped to return to live here. My wife and I have good friends and family in this area. As we began to investigate opportunities in this area, I was surprised and pleased to discover Kootenai Health is locally owned and operated for the benefit of the local community. In the current health care environment, it is increasingly rare to find communities that have been able to retain local control of their health care services. After meeting and talking with the team at Kootenai Health, I was impressed with their vision and look forward to serving in this community.



*I really enjoy the **COMMUNICATION** I have with my patients so I can help them make the best health decisions.*

### MATT TAYLOR, M.D.

Cardiologist,  
Heart Clinics Northwest



#### Tell us a little bit about you and your family.

I grew up in Utah, and my wife, Suzi, is from Colorado. We've been married 19 years, and over the course of training, working and training again, we've lived in five states and three countries. We have five kids, ages 4 to 14; they all love to play sports, ski and try to get away with eating nothing but candy.

#### Why did you pick your specialty?

I did a full family medicine residency and practiced for five years as a family physician, doing a little bit of everything from delivering babies to emergency room work. I always had a secret love for cardiology and finally got up the gumption to go back to training in 2009. Electrophysiology is a field that deals with

cutting-edge technology and can oftentimes offer “cures” for patients’ cardiac problems.

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

A smile, genuine concern and empathy, and time enough for explanations that are understandable.

### What are some of your hobbies?

I spend most of my Saturdays going to my kids’ soccer and basketball games. Besides that, I enjoy skiing, hiking and backpacking, biking, golfing, fishing, and hunting. Once upon a time, we loved to travel to exotic places like Wyoming.

### What drew you to Kootenai Health?

The most attractive thing was meeting the partners and feeling like they were genuinely caring and down to earth. I was also very impressed with the executive director, Mary Odenthal. And we were drawn to the beauty of the area, the mountains and the prospect of having all four seasons.

## ERIC WALLACE, D.O.

Interventional  
Cardiologist, Heart Clinics  
Northwest



### Tell us a little bit about you and your family.

I was born and raised in western Washington and graduated from Eastern Washington University in 2002. After graduation, as part of my medical training, I had the opportunity to live in Missouri, North Carolina and Kentucky, where I have been fortunate to have accumulated many great friends, mentors and my wife of 10 years. We currently have three children, ages 6 (girl), 4 and 1 (boys). Best of all, we are now just hours away from our families.

### Why did you pick your specialty?

My first exposure to medicine and patient care came as an EMT over 15 years ago with the Cheney Fire Department. While there, I frequently encountered patients with acute cardiac emergencies. At



*As a physician,  
I strive to earn  
my patients’  
**TRUST**  
and provide  
honest feedback  
and outstanding  
care.*

that surround us are constantly expanding. In fact, we are now routinely providing therapeutic options for patients that were not even available several years ago. It is truly a field growing like no other.

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

First and foremost, at a patient’s first visit, they are going to meet someone who grew up in the region, wants to be a lifelong member of the community, and can relate to nearly anybody. As their physician, I will strive to earn their trust by listening to their concerns and providing honest feedback and outstanding care. Second, when a patient comes to see me, I will put their needs first and seek out second opinions among our tremendously experienced cardiovascular group whenever necessary. Finally, I would like patients to know that the field of cardiovascular care is constantly changing and I am willing to consider additional

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## MEET OUR NEW PHYSICIANS

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treatments that might not have been previously available.

### What are some of your hobbies?

Whenever possible our family enjoys getting outdoors, including hiking and exploring. I'm personally looking forward to riding the local terrain on my mountain and road bikes and playing the local golf courses.

### What drew you to Kootenai Health?

Ever since I left the Northwest over 13 years ago, I've had the desire to return. Kootenai Health is really experiencing an exciting time of growth, and to pair the region's demands with an outstanding established cardiovascular group like Heart Clinics Northwest was perfect timing for me. Furthermore, the city of Coeur d'Alene and the surrounding community is the perfect backdrop for my wife and me to raise our family and enjoy all the outdoor activities northern Idaho has to offer.

### KEVIN WEBB, M.D.

Gastroenterologist,  
Kootenai Clinic  
Gastroenterology  
and Endoscopy



### Tell us a little bit about you and your family.

My family resides in Oklahoma, but I have lived all over the U.S. for college, medical school and medical training. Before I decided to attend medical school, I played football as a defensive lineman at Oklahoma. During my intern year, I found and married a beautiful northern Idaho girl who was in anesthesia (CRNA) school at Duke. We both finished training and are finally at a point in our lives that we are able to move to a place where we can raise our family. We just celebrated the addition of our precious daughter. She joins a very busy big brother, and our oldest is a black Lab named Boomer.



*The less-invasive procedures that have been **DEVELOPED** help gastroenterology patients avoid surgery.*

### Why did you pick your specialty?

Gastroenterology is the specialty that has it all, in my opinion. There is a wide range of diseases, a screening procedure that has been shown to save lives (colonoscopy), and many subspecialties to choose from within the field. As less invasive procedural alternatives for centuries-old problems have been developed, gastroenterology has been at the head of the pack with interventional endoscopy. These innovative procedural approaches can reduce surgeries and the morbidity and mortality related with them.

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

I want patients to always feel comfortable with me, confident in me and

that seeing me was worth their time. I am always reminded of a quote from the American College of Gastroenterology president Dr. Ronald Vendor: "Remember that for each patient, their visit with you is the most important thing in their life on that day." It's an easy thing to forget on a busy day, so I try to remind myself of it frequently.

### What are some of your hobbies?

My hobbies include spending time with my family, golfing, watching Oklahoma Sooner football and spending time in the outdoors. I hope to add bow hunting for elk to my list.

### What drew you to Kootenai Health?

Coeur d'Alene still has a small-town feel, but also features a top-notch hospital providing care that rivals a big city tertiary care experience. In addition, and perhaps most important, being in Coeur d'Alene enables us to be closer to family.

# New hope for heart patients

## NEW CLINICAL TRIAL MAY OFFER A BETTER QUALITY OF LIFE

By Andrea Nagel

When most people think of a parachute, they often imagine colorful nylon strapped to the back of a daring skydiver, hoping for the best as he or she freefalls thousands of feet toward the earth. Although he may not have felt the rush of the wind, heart attack survivor Keith Sutherland may have felt the same excitement as he took a different kind of leap when he signed up for a clinical trial through Kootenai's Heart Clinics Northwest just over a year ago.

The Parachute Ventricular Partitioning Device is a medical device for patients who have heart failure following a heart attack. After a heart attack, many people experience enlargement or even aneurysm of a portion of the left ventricle of the heart, which causes blood to settle in the heart. Because the heart cannot effectively pump blood from the damaged portion, patients often experience heart failure symptoms such as fatigue and shortness of breath. These symptoms can limit their ability to go about their daily life and activities.

"We typically treat patients with this condition by adjusting their medications, adding diuretics, inserting a defibrillator, doing open-heart surgery to restore blood flow, or even cutting out an aneurysm," said Ronald Jenkins, M.D., interventional cardiologist. "The parachute device allows a minimally invasive alternative to surgery and offers the possibility to improve a patient's quality of life."

### HOW DOES IT WORK?

The parachute device, which looks a lot like a miniature upside-down umbrella, is implanted in the heart via a catheter. Once inside the left ventricle, the parachute opens to fill the chamber and exclude the nonfunctional heart segment. The device is built to restore both the shape and the pumping function of



Ronald Jenkins, M.D., listens to Keith Sutherland's heart during a checkup.

the heart. It is lightweight and can easily contract and expand as the heart beats.

The clinical trial is studying over 1,500 patients nationwide to determine if the device can slow the progression of heart failure and improve the quality of life for those who have had a heart attack.

"The change has been very subtle," Keith said. "But I've noticed I can do things that I couldn't before, like clean my house without having to take breaks. My quality of life is getting back to normal."

Keith said he was scared at first and almost didn't agree to participate in the trial, but Dr. Jenkins' confidence in the device encouraged him to give it a try. And, according to Dr. Jenkins, the type of heart attack Keith had, involving the apex (bottom point) of the heart, made him an ideal candidate for the device.

"Of course it scared me," he said. "But I thought, who knows what will happen in the future. If my kids or grandkids have problems, this could benefit them. It makes me feel good to know that I could help someone."

There are currently over 50 active clinical trials that Heart Clinics Northwest is recruiting patients for, and over 600 patients like Keith that are being monitored as participants in ongoing trials. Dr. Jenkins said he has strict requirements for clinical trials he agrees to take part in.

"I have to really believe in it," he said. "I look at the benefits and the downside and look to see if it can potentially benefit humanity as a whole. We've come a long way in medicine, but we're still dependent on trials to continue to propel us forward."



**LEARN THE LATEST** about clinical trials available through Kootenai's Heart Clinics Northwest: Contact our research department at [hcnw-research@kh.org](mailto:hcnw-research@kh.org).



# Worth a Thousand Words

IMAGING SERVICES ARE INTEGRAL TO PATIENT CARE

By Stacie Jones

**Every picture** tells a story. In the world of medical imaging, the stories are of playground mishaps and sports injuries; of cancer diagnoses and treatments; or of growing unborn life and cured illnesses. The pictures tell stories of the human body, and they

unlock the information physicians need to make the body better, stronger and healthier.

From fracture exams or mammograms to cardiology studies or three-dimensional brain scans, Kootenai Health provides comprehensive imaging services and a full team of radiologists and technicians to diagnose and treat patients.

“In the past, patients might have had to travel outside the area to get the latest and greatest imaging services and expertise, but today there are very few imaging procedures that can’t be done here locally,” said Mike Blee, executive director of cardiopulmonary and imaging services at Kootenai Health.

Mike said his team works continually to keep Kootenai’s imaging services updated with the latest technologies and capabilities.

“We assess our services annually to ensure we provide patients the best imaging quality possible,” he said.

This fall, Kootenai will begin offering patient exams on a brand-new 3-T MRI in Post Falls, one of three locations for outpatient imaging. The powerful 3-T scanner represents the highest level of imaging technology available, and it is often the choice of universities and academic medical centers because it provides the highest-



Joe Cutler, MRI imaging assistant, prepares a patient for an MRI.



**MAKE AN APPOINTMENT TODAY** for your annual screening mammogram. Visit [KH.org/imaging](http://KH.org/imaging), or call (208) 625-6300.

quality images for many types of exams.

“The 3-T MRI is ideal for orthopedic and neurologic exams,” said Jennifer Neely, director of Kootenai Outpatient Imaging. “It offers superior image quality, it’s quieter than the older machines, and it is faster, which means patients spend less time on the scanner table.”

Patient safety is also a top priority for Kootenai’s Imaging Services. Over the past several years, the team has implemented new equipment, tools and staff protocols that improve their ability to monitor and lower a patient’s exposure to the radiation that is produced by some imaging modalities, including x-ray and CT.

“When we talk about providing quality service, we talk about how to keep patients safe and strategize lower patient radiation dose,” Jennifer said. “It’s an ongoing discussion; we are always looking for ways to minimize dose and to train our staff so they know ways to reduce dose themselves.”

Nearly all of the imaging equipment is centrally connected to a software program that monitors and analyzes radiation dosage for every patient procedure. If radiation dosages exceed set limits, the system alarms the technician in real time so dosages can be corrected accordingly.

“We monitor radiation exposure very carefully, and as a result, we’ve been able to keep average patient doses well below American College of Radiology guidelines,” Mike said.

It’s all part of Kootenai’s commitment to providing patients with the best experience possible.

“We try to treat every patient as an individual,” Jennifer said. “Even though this is something we do every day, we understand that this could be something very scary for them. We try to educate all patients about why they are here and walk them through their studies so they know what to expect.”



Dillon Smedley is an imaging specialist at Kootenai Health. Here he is pictured with one of Kootenai’s newest CT scanners, which combines x-rays and computers to produce 2- and 3-D images.

## IMAGING PROCEDURES AVAILABLE

Available imaging procedures include:

- ▶ **X-ray** uses electromagnetic radiation to capture images of dense structures inside the body. It is often used to study bony structures, the gastrointestinal system, and kidney or bladder function (with contrast material).
- ▶ **Ultrasound** sends sound waves into the body. These waves bounce off body structures and produce real-time images on a monitor. It is often used to study unborn babies, internal organs, muscles and other soft tissue structures.
- ▶ **Computed tomography (CT)** combines x-rays and computers to produce 2- and 3-D images. It helps in the diagnosis of various symptoms or conditions and guides treatment decisions.
- ▶ **Magnetic resonance imaging (MRI)** uses a powerful magnet, radio waves and computer technology to produce detailed, multidimensional images. It’s a versatile tool used in the diagnosis and treatment of many medical conditions.
- ▶ **Nuclear medicine** is a radiology subspecialty that combines the use of radioactive tracers and imaging technology to study the anatomy and function of organs.
- ▶ **Mammograms** are x-ray exams used to screen for breast cancer.



# Know Where to Go

## FAMILY DOCTOR, URGENT CARE OR EMERGENCY DEPARTMENT?

By Kim Anderson

**Being prepared** for an emergency includes planning what you will do if an emergency happens. Not all situations call for the same response, so knowing which response is appropriate for the situation is part of being prepared.

In northern Idaho, we are fortunate to have a number of excellent options for a variety of health care events. Knowing how to make the best choice for your situation will ensure you receive timely, appropriate care. Here's a look at the types of care available to you along with general guidelines on when to choose that level of care.

### DOCTOR'S OFFICE VISIT

If your symptoms come on gradually or you already know the diagnosis, such as an ear infection or urinary tract infection, you may want to try to get a same-day appointment with your primary care provider. While urgent care clinics have extended hours and accept walk-ins, your family doctor or nurse practitioner is usually a better place to start when you are sick or hurt. When you visit your doctor for an illness or injury, he or she knows your health history, including any underlying conditions, and can make informed choices about your treatment and needed tests.

If you do not have a family doctor,

it can be hard to know how to find one. Kootenai Clinic recently opened an appointment center to help people find a doctor that's right for them, make an appointment, and answer any questions they may have. The appointment center helps people find doctors who are accepting patients, including those with Medicare and Medicaid. For more information or to find a primary care provider, call **(208) 625-6767**.

### URGENT CARE VISIT

A study conducted by the National Center for Health Statistics found that of patients who had visited the emergency room but were not admitted to the hospital, 48 percent went there because their doctor's office was not open. If your doctor's office is closed and you need to be seen right away, but you don't need the level of care available at an emergency room, an urgent care is a great option.

Urgent care offices are same-day clinics that can handle a variety of conditions that need to be treated right away but are not true emergencies. Symptoms that can be treated at urgent care include (but are not limited to):

- ▶ Fever without rash
- ▶ Minor trauma such as a common sprain
- ▶ Painful urination

- ▶ Persistent diarrhea
- ▶ Severe sore throat
- ▶ Vomiting

### EMERGENCY DEPARTMENT VISIT

Emergency departments are designed to provide fast, lifesaving care. They respond to a wide variety of emergencies such as traumatic injuries, heart attacks and strokes. Many people, however, use the emergency department as a place to receive urgent care without realizing it.

The following are just a few of the conditions that are true medical emergencies. If you are experiencing one of the following conditions or something similar, go to the emergency department.

- ▶ Persistent chest pain or heart palpitations
- ▶ Persistent shortness of breath or wheezing
- ▶ Severe pain
- ▶ Loss of balance or fainting
- ▶ Difficulty speaking, altered mental status or confusion
- ▶ Weakness or paralysis
- ▶ Severe heart palpitations
- ▶ Sudden, severe headache
- ▶ Sudden testicular pain and swelling
- ▶ Intestinal bleeding



- ▶ Falls with injury or while taking blood-thinning medications
- ▶ Head and eye injuries or loss of vision
- ▶ Broken bones or dislocated joints
- ▶ Deep cuts that require stitches
- ▶ Head or eye injuries
- ▶ High fevers (over 102°) or fevers with a rash
- ▶ Vaginal bleeding with pregnancy
- ▶ Serious burns
- ▶ Seizures without a previous diagnosis of epilepsy

If you're ever in doubt, it's better to be safe and go to the emergency department.

## 911 CALL

Call 911 for any emergency that requires immediate assistance from an ambulance (or the police or fire department).

It is appropriate to call 911 when you have a medical emergency

such as an injury from a car crash, or a situation in which someone is unconscious, gasping for air or not breathing, experiencing an allergic reaction, having chest pain, having uncontrollable bleeding, or any other symptoms that require immediate medical attention. For certain medical emergencies, such as a heart attack or stroke, taking an ambulance is safer because paramedics can deliver lifesaving care on the way to the hospital.

If you're not sure whether the situation is a true emergency, officials recommend calling 911 and letting the call-taker determine whether you need emergency help. When you call 911, be prepared to give your location and detailed information on the situation. Stay on the line until the call-taker says it is OK to hang up.

If you dial 911 by mistake, or if a child in your home dials 911 when no emergency exists, do not hang up; instead, simply explain to the call-taker what happened.



**FIND A**  
primary care  
provider:  
**(208) 625-6767.**

## BE PREPARED FOR MEDICAL CARE

Whether you're going to urgent care, the emergency department or your primary care provider's office, it's good to keep a list of all the medications you take with you. Be sure it includes dosages and any over-the-counter medications and vitamins you take. Your list should also include your allergies, especially to medications, and any previous invasive medical procedures and surgeries, including the dates they were done and the name of the physician or surgeon who treated you.

## COST

No health care discussion would be complete without a few words on cost. Costs vary based on the facilities where you receive care. Equipping and staffing an emergency department to respond to medical emergencies is more expensive than operating a physician office or urgent care. This means that care received in the emergency department will cost more than care received elsewhere.

If you are having a life-threatening emergency, call 911 or visit the emergency room as soon as possible. If you do not need immediate, emergency care, consider using an urgent care or your primary care provider to keep your costs as low as possible.




# We Need You!

A FEW HOURS OF YOUR TIME MAKES A DIFFERENCE FOR OUR PATIENTS

By Andrea Nagel

**Kootenai Health** has one of the strongest hospital volunteer programs in the Northwest, consisting of the Kootenai Health Auxiliary for adult volunteers, the Nightingales for retired nurses, the teen volunteer program, Mended Hearts for cardiac patients, and Safe Kids for injury prevention.

These volunteers provide a host of services throughout the year, ranging from escorting patients and running errands for staff to creating a welcoming environment in waiting areas. Kootenai Health

 **BECOME A VOLUNTEER** If you would like to become a volunteer at Kootenai Health, contact our Volunteer Services at **(208) 625-4645** or visit **[KH.org/volunteer](http://KH.org/volunteer)**. For the Mended Hearts group, call **(208) 625-4693**, or for Safe Kids Kootenai County, contact Donna Kalanick at **(208) 625-5722**.



Donna Kalanick installs a car seat as part of Safe Kids Kootenai County's weekly car seat checks.

volunteers annually donate more than 35,000 hours in service to the health of our community.

"We are so fortunate to have our volunteers," said Sarah McManus, director of volunteer services. "The heart of a volunteer is exceptional. Because we are a not-for-profit hospital, they play a very important role."

## OPPORTUNITIES TO SERVE Nightingales (volunteer nurses).

Nightingales are volunteer nurses who spend their time interacting with patients and families. Working under the guidance of staff nurses, Nightingales provide services that fit their personal schedule and interests. Nightingales spend time with patients, assist them with daily tasks and activities, and assist staff with admissions and discharges. Nightingales must have an active or emeritus RN license.

**Auxiliary.** Kootenai Health's Auxiliary is made up of nearly 200 men and women who provide a variety of services for the hospital. The Auxiliary is managed and operated by an elected board of officers, and members are expected to provide 40 hours of volunteer service annually. Auxiliary services include (but are not limited to):

- ▶ Escorting patients
- ▶ Providing directions to visitors
- ▶ Managing waiting rooms
- ▶ Delivering newspapers, mail, flowers and gifts



Joyce Kollaja (right) volunteers in the surgical lobby, assisting nurses like Heather Jones (left) and family members of those receiving care.

**Teen volunteers.** Founded in 1980, Kootenai Health's teen volunteer program is for teens ages 14 to 18. Teens have the option to volunteer during select summer sessions or on weekends and evenings throughout the school year. They perform a variety of tasks, including:

- ▶ Discharging patients
- ▶ Delivering newspapers, mail, flowers and gifts
- ▶ Running internal errands for various departments and staff

**Mended Hearts.** Volunteers with Kootenai's Mended Hearts group have personally been through a serious cardiac event or open-heart surgery. They meet with current cardiac patients to offer support and guidance.

**Safe Kids Kootenai County.** Volunteers with Safe Kids Kootenai County educate the public about car seat, bike helmet and water safety. Car seat technicians educate families about proper car seat installation and techniques to help keep their children safe. A special certification course is required to become a car seat technician.



## Q What immunizations are important for my kids to have before they start school this fall?

As a medical community, it is not only our duty to care for individual patients, but also to focus on the greater good of a community and address its public health needs. Nothing exemplifies this more than the promotion of immunizations.

While individuals benefit from the protection provided by singular immunizations, oftentimes the larger benefit comes from what is termed “herd immunity.” This term refers to the protective effect one garners from being a member of a well-immunized community, whether vaccinated or not. For example, our community provides newborns and infants herd immunity during their susceptible early years prior to their first shots. Additionally, there are a small number of children who are unable to receive immunizations because of allergy or poor immune response, and they are also protected

when the “herd” is immunized.

This is the foundation for the Idaho Immunization Program (IIP) and the immunization requirements prior to starting kindergarten. Although the IIP only specifies certain immunizations that are required (these are listed at [healthandwelfare.idaho.gov](http://healthandwelfare.idaho.gov)), I would argue that all of the immunizations recommended by Centers for Disease Control and Prevention (CDC) Advisory Committee on Immunization Practices schedule are important before starting school, and all have substantial evidence supporting their benefit.

Some immunizations prevent severe illness and death, whereas others reduce medical costs and strain on our burgeoning medical system. Further, others reduce lost wages for parents and ensure that our children are not missing critical school time while being sick at home. Therefore, to specifically address the question of which immunizations are most important prior to starting school, the most accurate answer is, all of them.



Jonathan Shupe, M.D.,  
Kootenai Clinic Family  
Medicine Coeur d’Alene  
Residency



### GET YOUR SHOTS

For more information about required immunizations, visit [healthandwelfare.idaho.gov](http://healthandwelfare.idaho.gov) and for CDC-recommended vaccinations, visit [cdc.gov/vaccines/schedules](http://cdc.gov/vaccines/schedules).



# Inside Kootenai

## WHAT IS THE NO. 1 THING PATIENTS CAN DO TO IMPROVE THEIR HEALTH?

For each issue of *Kootenai Health* magazine, we solicit tips from some of our employees that we believe will be helpful to our readers in some way. These tips come from a variety of specialties to help ensure quality, unique answers. For this issue, we reached out to several of our Kootenai Clinic physicians, all from different clinics and specialties. This is an important point because oddly enough every physician came back with the same answer to our question. What is the one thing they all believe patients can do to improve their overall health and wellness? Exercise.



**CATHERINE CHESTER, M.D.**

**Kootenai Clinic Internal Medicine**

"I would say, exercise. Regular exercise is good for you at any age, and our bodies are meant to move and be active. No matter what your current state of health may be, exercise can help your physical and mental health in numerous ways; it is never too late to begin."

**KEVIN WEBB, M.D.**

**Kootenai Clinic Gastroenterology and Endoscopy**

"I'm not sure there is a No. 1 thing, but I definitely think you should live a healthy lifestyle in general which includes eating a healthful diet and getting plenty of exercise."



**JEFF ALLEN, M.D.**

**Kootenai Clinic Cancer Services**

"I am a big believer in maintaining an active lifestyle. I always encourage my patients to get out daily, whether through walking, running, stretching, yoga, Pilates, etc."

**REGAN HILL, M.D.**

**Kootenai Clinic OB-GYN**

"I encourage all my patients to have a regular exercise program. Even if it is only a daily walk, mild to modest exercise has many health benefits."



## HOW CAN I EASILY INCORPORATE EXERCISE INTO MY DAILY ROUTINE?

Going to the gym or setting aside an hour may not be an option for everyone, but that doesn't mean you can't fit simple exercises into your normal daily routine.

**Walk or bike during your errands.** Walk or ride your bike instead of driving to do your errands. If you don't live within walking or biking distance, drive to a shopping center and walk from shop to shop.

**Take part in playtime.** Take a lesson from your kids and make time to play. Play soccer, Frisbee, tag or climb on the play equipment with them. If you don't have kids, play chase or ball with your dog, or get a group of friends together for a pick-up game.

**Add in extra steps.** Take the stairs or park farther away at work. Set a step goal and track it with a pedometer or app to reach your goal.

**Add 15 to 30 minutes.** If you already schedule time for walks or other activities, challenge yourself to make them a little longer. Walk your dog an extra 15 minutes, spend 15 to 30 minutes working around the house, or wake up a half-hour earlier to do some stretching in the morning.



# 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**, Sept. 8 to 29,  
6 to 8:30 p.m.

**Thursdays**, Sept. 10 through Oct. 1,  
6 to 8:30 p.m.

**Tuesdays**, Oct. 6 to 27,  
6 to 8:30 p.m.

**Thursdays**, Oct. 8 to 29,  
6 to 8:30 p.m.

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

### Bringing Baby Home | \$15

**Saturday**, Sept. 12, 9 a.m. to noon

**Monday**, Oct. 5, 6 to 9 p.m.

**Saturday**, Nov. 7, 9 a.m. to noon

### Breastfeeding Basics | \$15

**Wednesday**, Sept. 9, 6 to 8:30 p.m.

**Wednesday**, Oct. 7, 6 to 8:30 p.m.

**Wednesday**, Nov. 11, 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) 625-5311**, 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 **(509) 591-4169**.

### 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) 625-4690**.

### 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.



Falls at Glacier Park  
Richard Palmer



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Sunday, September 20, 2015  
North Idaho College  
For more information or  
to register [komenidaho.org](http://komenidaho.org)



**KootenaiClinic**

Cancer Services | 208.625.4700 | [kh.org/cancer](http://kh.org/cancer)