

WELLNESS



The vital role of CRNAs at CHWC



Cancer screening quidelines



Experience and excellence in CHWC surgical services



ENT, Sinus and Allergy Clinic grows

COVER PHOTO: (From L to R) CRNAs Larry Pickett, Steve Schultz, Scott Johns, Chuck Tabbert and Megan Fillman play a vital role at CHWC.

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CHWC Employee Philanthropy Program grants over \$100K

n 2020, the Employee Philanthropy Program at Community Hospitals and Wellness Centers (CHWC) reached a milestone of providing over \$100,000 in grants to area organizations and individuals/families.

The Employee Philanthropy Program (EPP) is made up of and led by CHWC staff, and supports 501(c)(3) organizations from the CHWC service area who help with health, food, housing and safety needs. The EPP also assists employees and their families who are facing a sudden financial need. On average, over 100 employees donate to the fund, and the CHWC Board of Directors provides a dollar-for-dollar match for all contributions raised by staff during pledge drives.

The EPP has supported numerous area organizations, including: Bed Brigade of Williams County, NAMI Four County, Sufficient Grace Ministries, Sarah's Friends, BAHEC Older Adult Support (Project Lifesaver), Henry County Health Department (Cribs for Kids), Toledo NW Ohio Food Bank, Community Education Development, Sexual Assault Response Team (SART), Williams County Community Gardening Association, Mentors for Williams County, Never Let Go Ministries and Sufficient Grace Ministries. EPP has granted over \$50,000 to local nonprofit organizations. Additionally, \$53,500 has been granted to CHWC employees and volunteers as well as their spouses, children and other dependents since the founding of the EPP in the fall of 2016.

an act of compassion. I think it's great that so many employees want to give back to the community and help others. We are so proud of the way CHWC is making a positive impact in our community," says Barb Rash, EPP's chairperson and Director of Nursing for CHWC's Emergency Department.

EPP funding is granted to tax-exempt organizations operating or proposing to operate programs that benefit residents within CHWC's service area, comprising Williams, Fulton, Defiance and Henry counties in Ohio. Some examples of financial support priorities include programming for youth, older adults, community social services, community health and wellness, community mental health and community disease prevention.

CHWC employees and volunteers, as well as their family members, may also be eligible for EPP grant dollars; grant determinations are made by contributing employees who serve on the EPP governing council. Every effort is made to ensure that funds are granted in a manner that is open, transparent, objective, nondiscriminatory and by methods that are uniformly applied to ensure potential recipients are undergoing a hardship and are legitimately in need of assistance.

TO LEARN MORE about the CHWC EPP, visit www.chwchospital.org/EPP.





nesthesia is an essential part of medical care that is associated with numerous branches of medicine. Certified registered nurse anesthetists (CRNAs) can be found in operating rooms and labor/delivery suites, at diagnostic and therapeutic procedures, providing stabilization for trauma and interventions for critical care, and many other areas. They provide general anesthesia, epidurals, regional and local anesthesia techniques, and pain management and monitoring modalities.

"We provide all forms of anesthesia in all different care settings," says Scott Johns, CRNA and chair of anesthesia services at Community Hospitals and Wellness Centers (CHWC). "We're also airway experts, so we help outside of the OR to secure airways in patients with breathing problems; we intubate COVID-19 patients, we do central lines, labor analgesia, pain management for post-total joints, all kinds of things."

EDUCATION AND TRAINING OF CRNAS

CRNAs are board-certified advanced practice nurses who complete extensive education and training. According to the American Association for Nurse Anesthetists, CRNAs complete 7–8.5 years of coursework and clinical hours to attain a masters or doctoral degree in nurse anesthesia — accumulating over 9,000 hours of clinical experience to earn their CRNA license. In most states, CRNAs are not required to work with physician anesthesiologists, meaning it's not uncommon for CRNAs to be the sole providers of anesthesia care for patients.

This is the case at CHWC, with a team of six CRNAs managing a high level of anesthesia services. "The setting here at CHWC is an all-CRNA practice. We provide all the anesthetics you would expect from any facility, large or small. I want the community to know we can meet their needs here; there is nothing they should expect or need that we can't deliver," Johns says.

A MAJOR POINT OF PRIDE

In addition to delivering exceptional care, Johns discusses another point of pride among his CRNA colleagues at CHWC: reducing the amount of opioids used among patients. "Our pain service is a huge boon for the community. We have patients who do total joint replacements and require no narcotics at all," he states, explaining that this shift has taken place over the past three years or so, with a half to two-thirds reduction in opioids administered to CHWC patients.

CRNAs have been valuable members of the medical community for over 150 years, providing patients with anesthesia in health care settings large and small. The CRNAs practicing at CHWC are dedicated to providing the full range of safe, high-quality anesthesia care so patients can remain local for all their health care needs.

Pictured above, from L to R: CRNAs Larry Pickett, Steve Schultz, Scott Johns, Chuck Tabbert and Megan Fillman.

CANCER SCREENING GUIDELINES

BE IN-THE-KNOW ABOUT YOUR HEALTH

ancer screenings are an important part of your health, but it can be difficult to keep up with the latest recommendations. The following are current screening recommendations for some of the most common cancers treated locally. Please note that this is not a complete list of signs and symptoms or risk factors associated with each of the cancers included in this article. Get more details about cancer screenings by visiting www.cancer.org.

COLON CANCER

Common Symptoms

- Possible change in bowel habits
- Rectal bleeding
- Blood in your stool

SCREENING RECOMMENDATIONS

People at average risk: Start screening at age 45 with either a stool-based test that looks for signs of cancer or with a visual exam that looks at the colon and rectum.

Ask your healthcare provider which option is best for you. People are considered to be at average risk if they do not have:

- A personal history of colorectal cancer or certain types of polyps.
- A family history of colorectal cancer.

People ages 76–85: The decision to be screened should be based on a person's preferences, life expectancy, overall health, and prior screening history.

People over 85: Do not screen for colorectal cancer.

To schedule a colorectal screening at the CHWC Gastroenterology Clinic, call 419-630-2021.

PROSTATE CANCER

Common Symptoms

- Problems passing urine
- Blood in the urine

SCREENING RECOMMENDATIONS

Men should make an informed decision with their healthcare provider about whether they should be screened for prostate cancer. These discussions should take place at:

Age 50: Men at average risk and are expected to live at least 10 more years.

Age 45: Men at high risk of developing prostate cancer — this includes African Americans and men who have a first-degree relative (father or brother) diagnosed with prostate cancer at an early age (younger than age 65).

To schedule a prostate screening at the CHWC Urology Clinic, call **419-633-7596**.

ENDOMETRIAL CANCER

Common Symptoms

The best way to detect endometrial cancer early is to talk with your healthcare provider if you have symptoms such as abnormal vaginal bleeding or discharge. Some endometrial cancers may reach an advanced stage before causing signs and symptoms.

SCREENING RECOMMENDATIONS

There are currently no screenings to detect endometrial cancer early in women who are at average endometrial cancer risk and have no symptoms.

Women at increased risk for endometrial cancer should see their healthcare provider whenever they have any abnormal vaginal bleeding.

If you have experienced the symptoms above and have concerns, contact the CHWC Women's Health Clinic at 419-633-0755.

BREAST CANCER

Common Symptoms

Any breast changes (e.g., a lump). If changes are detected, see a provider right away.

SCREENING RECOMMENDATIONS

Age 40–44: Choose whether you want a mammogram to screen for breast cancer. Women should discuss with their healthcare provider about the best time to start screening.

Ages 45–54: Mammograms every year.

Ages 55+: Switch to mammograms every two years OR continue yearly screening. Screening should be done as long as you're in good health and expect to live at least another 10 years.

You should be familiar with the known benefits, limitations and potential harm linked to breast cancer screening. You should also be familiar with how your breasts normally look and feel, and report changes to a healthcare professional right away.

If you are at increased risk for breast cancer due to a family or personal history, talk to your provider about your screening plan.

Talk to your primary care provider about scheduling a breast screening.





TO MAKE AN APPOINTMENT at the new medical oncology clinic at Bryan Hospital, call 419-630-2291. Learn more about cancer care services at CHWC by visiting chwchospital.org/cancer-care.

CERVICAL CANCER

Common Symptoms

While there are often no symptoms, abnormal vaginal bleeding or discharge may occur.

SCREENING RECOMMENDATIONS

Age 25: Begin screening for cervical cancer.

Age 25-65: HPV test every 5 years.

Age 65+: If you have had regular cervical cancer testing in the past 10 years with normal results, you no longer need to be tested for cervical cancer. Once testing is stopped, it should not be started again. Those with a history of a serious cervical pre-cancer should continue to be tested for at least 25 years after that diagnosis, even if testing goes beyond age 65.

Women whose cervix has been removed by surgery for reasons not related to cervical cancer or serious pre-cancer should not be tested.

Those who have been vaccinated against HPV should still follow the screening recommendations for their age groups.

Some individuals — because of their health history (HIV infection, organ transplant, DES exposure, etc.) — may need a different screening schedule for cervical cancer. Talk to a healthcare provider about your history.

To schedule a cervical screening at the CHWC Women's Health Clinic, call 419-633-0755.

LUNG CANCER

Common Symptoms

- Stubborn cough that will not go away or worsens over time
- Chest pain that is worse with deep breathing, coughing or laughing
- Shortness of breath

SCREENING RECOMMENDATIONS

Yearly lung cancer screening with a low-dose CT scan (LDCT) for certain people at higher risk for lung cancer who meet the following conditions:

- Are ages 55–74 and in fairly good health.
- Currently smoke or have quit smoking in the past 15 years.
- Have at least a 30 pack-year smoking history (a pack-year is one pack of cigarettes per day per year — one pack per day for 30 years or two packs per day for 15 years would both be 30 pack-years).

Risk Factors

- Smoking is by far the leading risk factor for lung cancer. If you or someone you care about needs help quitting, email *quitsmoking@chwchospital.org* or call **419-630-2163**.
- Regular exposure to secondhand smoke, radon, asbestos and other cancer-causing agents.
- Personal or family history of lung cancer.

Lung screenings are available at the CHWC Radiology Department with a physician's order. Speak with your primary care provider about getting an order.

HEAD & NECK CANCER

Common Symptoms

- A sore in the mouth that doesn't heal
- Mouth pain that doesn't go away
- A lump or thickening in the cheek
- A white or red patch on the gums, tongue, tonsil or lining of the mouth

SCREENING RECOMMENDATIONS

A dentist or other doctor may find head/ neck cancers or pre-cancers during a routine exam, but many of these cancers are found due to symptoms a person is having. If there is a reason to think you may have cancer, your physician will refer you to a doctor who specializes in head and neck cancers, such as an otolaryngologist (also known as an ENT doctor).

Risk Factors

- Most people with head and neck cancers use tobacco, and the risk of developing these cancers is related to how long they smoked or chewed.
- Drinking alcohol increases the risk of developing head and neck cancers — about 7 out of 10 patients with these cancers are heavy drinkers.
- The number of head and neck cancers linked to human papillomavirus (HPV) has risen dramatically over the past few decades.

To schedule a head and neck screening at the CHWC ENT, Sinus & Allergy Clinic, call 419-633-7389.

Source: American Cancer Society

ndergoing any type of surgical procedure is a big life event for many people, and it can be stressful regardless if it's an inpatient (overnight) or outpatient (same-day) procedure. The high level of professionalism within the surgical services team at Community Hospitals and Wellness Centers (CHWC), as well as the abundance of state-of-the-art equipment and surgical suites make for a comforting, top-of-the-line surgical experience.

PREPARING FOR SURGERY

To help reduce stress surrounding an outpatient surgical procedure, CHWC Surgery Supervisor Samantha Wonders offers suggestions. "Obviously, you will need somebody to take you home, but also plan to have somebody with you for at least the next 24 hours, especially if you've had IV sedation or anesthetic, because it really does wipe you out," she says, adding, "don't plan for anything else that day. Sometimes we have to call patients in early, sometimes things run late, so being in the mindset of planning the whole day to be dedicated to your procedure is really helpful."



TO LEARN MORE about surgical services at CHWC, visit *chwchospital.org/surgical-services*.

Wonders describes the behind-the-scenes life in a surgical department as a constant adaption to change. "For the most part, it's very smooth for the patient, but coordinating everything requires us to think on our feet and communicate really well. Some days are smoother than others, it seems," she says with a smile. "There are emergency addon surgeries, staff call-offs, COVID-19 — so many things that require us to rework the schedule a little bit, but there's always some sort of workaround."

The process for a patient tends to follow a simple path: a patient will see their doctor about getting scheduled for surgery, which then goes to the CHWC surgical services team. Some patients require preoperative workups such as labs, X-rays or medical/cardiology clearances, so the CHWC pre-op clinic staff connect with the patient to provide instructions and education on preparing for surgery. The day of surgery, patients register and are admitted, then go into surgery. Outpatients are monitored until they are ready to head home, while inpatients are transferred to the appropriate unit for recovery.

COMMUNICATION IS KEY

Wonders notes that success among CHWC's surgery staff hinges on communication; not just with preparing for surgery, but also for the sake of patient safety. "We call it a time-out. Most people think of the time-out as being a moment we take in the OR before we start a case: we review the patient's name, date of birth, procedure the patient is there for, equipment in the room, pre-op antibiotic and whether it's necessary or if it was given, 'Does everyone agree that this is what we're here to do?' If everyone agrees, then we proceed," Wonders says. "But the time-out actually starts the moment a patient is met by staff. Whether it's registration, the nurse that's admitting them, the unit secretary, the circulator — everyone is matching up what the patient is saying with our paperwork. The time-out is a constant thing that we do to verify patient information at every step in the process, for the patient's safety."

CONFIDENCE IN SPECIALTY SERVICES

Patients can take comfort in knowing that CHWC surgical services staff are experienced in all specialties offered at Bryan Hospital and Archbold Medical Center. Wonders states, "Whether you are having your gallbladder removed, needing a broken bone reset or getting a total hip replacement, our team is well-versed in each specialty. We have really good processes for knowing what's needed, knowing a doctor's preferences and looking at the best possible outcomes for each patient."

In 2020, CHWC's surgical services team performed the following number of cases per specialty:

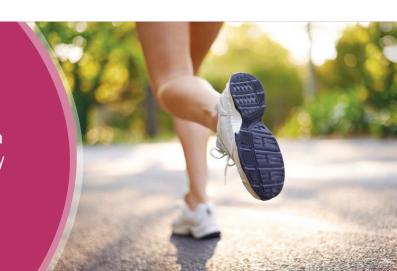
the following number of cases per specialty:	
ENT (ear, nose, throat)	216
Gastroenterology	898
General surgery	1,310
OB/GYN	280
Ophthalmology	564
Orthopedics	577
Pain management	1,605
Podiatry	149
Urology	429
Total in 2020	6,028

SAVE THE DATE

Run for Your Heart 5K/10K

Participate virtually on your own time from June 19–July 3, or join us in person on the morning of June 26 at Bryan Hospital. Brought to you by the CHWC Cardiology Clinic and Williams County Family YMCA.

Get more details at chwchospital.org/runforyourheart.





The ENT, Sinus and Allergy Clinic at Bryan Hospital and Archbold Medical Center provides care Mondays—Fridays from 8 a.m.—4 p.m. To schedule an appointment, call **419-633-7389**.

Learn more by visiting chwchospital.org/ENT.



433 W. High St. Bryan, OH 43506-1690

ENT, SINUS AND ALLERGY CLINIC GROWS

JENNIFER RITTENHOUSE, CNP, JOINS THE TEAM

inus infections, balance disorders, hearing loss and ear infections are just a few of the conditions treated at the ENT, Sinus and Allergy Clinic at Bryan Hospital and Archbold Medical Center. With the arrival of Jennifer Rittenhouse, Certified Nurse Practitioner, to the clinic, even more access to ENT care is now available to the community.

WELCOMING JENNIFER RITTENHOUSE, CNP

Having joined the team in January 2021, Rittenhouse has already established good relationships with patients and with Dr. Michael Nosanov — who was instrumental in launching the ENT, Sinus and Allergy Clinic back in 2016 — as well as the other staff at Community Hospitals and Wellness Centers (CHWC). A wide range of issues are addressed at the clinic, such as: ear infections, allergies, sinus infections, hearing loss, snoring and sleep apnea, balance disorders, maxillofacial trauma, head and neck cancer, facial plastic and reconstructive surgery, elective cosmetic procedures and more.

Rittenhouse has worked in the nursing fields of labor and delivery, ENT, urgent care, surgery and more. She notes that ENT became a passion of hers because of the pediatric population seeking care, and the ease with which they are able to treat pediatric ENT issues.

"The environment at CHWC is so professional and welcoming. I'm excited about getting those relationships established with patients and helping them overcome their issues. I'm also really excited about the mix of medical and aesthetic services. With Dr. Nosanov's experience in both areas, I think we make a great team," Rittenhouse says, referring to the services at the clinic that are dedicated to elective cosmetic procedures.

MEET OUR ENT PROVIDERS



Dr. Michael Nosanov, Otolaryngologist

Medical Degree: State University of New York, Buffalo, NY

Residency: University of Minnesota Hospitals and Clinics, Department of Otolaryngology, Minneapolis, MN

Internship: Hennepin County Medical Center, Minneapolis, MN

Board certified by the American Board of Otolaryngology



Jennifer Rittenhouse, Certified Nurse Practitioner

Certified Nurse Practitioner License: Otterbein College, Westerville, OH

Bachelor of Science in Nursing: Medical College of Ohio in consortium with The University of Toledo

Experience in the fields of otolaryngology, urgent care, surgery and more.