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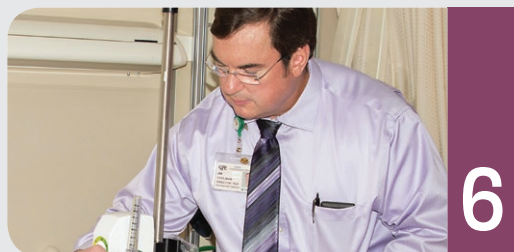
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COVER PHOTO: Kim and Kevin Oxender's newly-decaled motorcycle trailer honors the memory of their son Kaleb McLaughlin, who became a widely known organ, bone and tissue donor after his death in 2013.

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Certified nurse midwife delivers 100 bundles of joy

Lisa Fedderke, certified nurse midwife (CNM), marked a happy milestone in her career this spring. Since she became a CNM two years ago, she has delivered more than 100 newborns at Bryan Hospital.

She's happy to have played a role in bringing joy to so many families. "The thing I like most about being a midwife is being a little part of a family's experience in bringing their child into this world," Fedderke says.

EMPOWERING WOMEN

As the only midwife in Bryan, Fedderke is part of a valuable collaboration between Parkview Physicians Group (PPG), which employs her, and Community Hospitals and Wellness Centers (CHWC). The collaboration gives women in the Bryan area expanded choices for their health care and for delivering their babies.

"I love seeing women empowered with their health care and decision making, from well-woman visits to assisting in birthing their babies," Fedderke says. A midwife provides a natural, holistic approach to pregnancy. And with the collaboration between PPG and CHWC, it's all tucked inside the safety of a hospital.

Fedderke was a registered nurse (RN) before going back to school to study midwifery. "Working with the Amish as an RN in labor-delivery in Hicksville, Ohio, for seven years really opened my eyes to more natural labor," she says. "I knew I wanted to empower women with their birth decisions."



A VERY PERSONAL EXPERIENCE

Here in Bryan, expectant mothers can customize their birth experience to meet their individual needs and desires. Among the options available are use of a hydrotherapy tub, birthing ball, aromatherapy and counter pressure massage. "As a midwife, I provide additional labor support," Fedderke says. "I stay by a woman's side the whole time she's in the active phase of labor."

"I also spend a lot of time explaining options for pain management during labor to women before the birth so they can make educated decisions. It's a very individual choice. Some women choose epidurals and others prefer not to go that route. My role is to support mothers in whatever birth experience they choose."

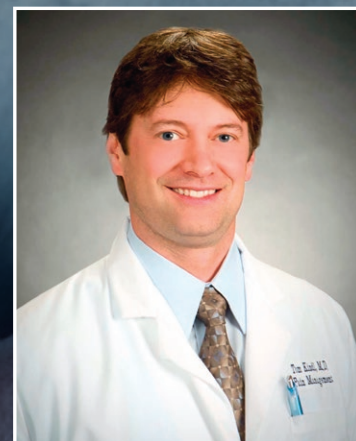
Receiving care close to home, rather than traveling to Fort Wayne or another city, is a big benefit for expectant moms. With the collaboration between PPG and CHWC, that option is available to more women. "Patients at CHWC have access to the additional resources that Parkview offers," Fedderke explains. "We have physicians who handle some high-risk pregnancies, including women with insulin-dependent diabetes, so they can stay close and deliver at Bryan Hospital. And women who want a vaginal birth after cesarean can receive their prenatal care here with me and then go to Fort Wayne for their delivery."

Mother Samantha Ludwig (left) and baby Oliver were Certified Nurse Midwife Lisa Fedderke's 100th delivery patients.



INTERESTED IN HAVING A MIDWIFE? To learn more about midwife services available through PPG or to schedule an appointment, call **(419) 636-4517**.

GET HELP TO TAKE CONTROL OF PAIN



Thomas Kindl, MD

Pain Management

Living with pain can be exhausting and severely impact your quality of life. Many people who suffer from pain believe it's unavoidable and something they must simply accept. But if you're one of those living with pain, the Community Hospitals and Wellness Centers (CHWC) Pain Management Clinic can help you take control of your pain and your life.

RELIEF FOR THOSE LIVING WITH PAIN

At CHWC's Pain Management Clinic, located at Bryan Hospital and Archbold Medical Center, Thomas Kindl, MD, helps patients manage their acute and chronic pain. "People are often referred for neck or back pain, or even pain in the joint of the arms or legs," explains Dr. Kindl. "But in addition to these conditions, we diagnose and treat a wide range of pain-related conditions at the clinic." Some of the other conditions treated at CHWC are:

- » Chronic pelvic pain
- » Fibromyalgia
- » Headaches
- » Persistent pain after back or neck surgery
- » Shingles pain

TREATMENTS TAILORED TO YOU

Many people assume that the only way to treat pain is through medication. But that is only one tool in the fight against pain. "It's critical to understand that there are techniques that we have that can improve your life quality and functions that are diagnosis-centered," Dr. Kindl says. "At the Pain Management Clinic, we have a widespread array of management tactics beyond the use of medication. We offer treatments using various modalities, including but not limited to: nerve root blocks, referrals for acupuncture, medication management and spinal injection therapy."

Dr. Kindl emphasizes that there's no one-size-fits-all approach to tackling pain. "Treatments are always made with the diagnosis in mind. We begin by looking for a pain diagnosis, and once a diagnosis

"At the Pain Management Clinic, we have a widespread array of management tactics beyond the use of medication. We offer treatments using various modalities, including but not limited to: nerve root blocks, referrals for acupuncture, medication management and spinal injection therapy."

– Thomas Kindl, MD

is made, we use a combination of therapies tailored to the patient's needs. We're always looking for effectiveness and outcomes that will restore function and reduce pain."

NEW REGULATIONS, AN OLD PHILOSOPHY

Recent regulatory changes in prescribing pain management medications may seem like a sudden shift, but for Dr. Kindl and CHWC, these new regulations only reinforce treatment ethics that have been a part of the clinic since it began.

"The regulations really are recommendations from the state and federal level, which are patient safety-centered," says Dr. Kindl. "Patient safety standards have been a longstanding principle of our clinic, so the new regulations are actually piggybacking on the ideals that we have prescribed to for years."

 **TO SCHEDULE AN APPOINTMENT** at the
CHWC Pain Management Clinic, call **(419) 633-7343**.

ORGAN DONATION: a bittersweet REALITY



undreds of peoples' lives were changed on June 24, 2013, whether or not they personally knew Kaleb McLaughlin.

On that morning, just 20 days after his 20th birthday, McLaughlin was killed instantly in an auto accident and — thanks to his dad's clear thinking in their time of grief — donated his eyes, skin, bone and tissues so he could enhance the lives of others after he passed.

McLaughlin's mother, Kim Oxender, describes the donation as a bittersweet reality. "I never dreamt anything could hurt so bad," she says. "Community Tissue Services called when we got home to ask questions that seemed awful at the time; they're so hard to answer. But it's the only way to determine what would be useful for donation. Because Kaleb died at the scene, his vital organs couldn't be used, but I had no idea all the other things that could be used: his skin, eardrums, bones, heart valves, tendons, ligaments, eyes. We received a letter before the funeral that someone received the gift of sight from Kaleb. It was a beautiful, bittersweet thing. We also learned later that one of the tissue recipients is a professional football player. Kaleb would have loved that."

THE UNEXPECTED JOURNEY

McLaughlin's story is known by many in northwest Ohio because each summer since his death, his family, friends and community gather for a day-long event that includes entertainment, vendors, a blood drive,

5K run, memorial motorcycle ride and more. But Oxender and her family didn't originally anticipate becoming some of the best-known organ donation advocates in the area; the journey began when the family ordered license plates with the Donate Life emblem on them. "There was a section to fill in why we were supporting the cause," Oxender recalls. "We won the contest and they wrote an article about our story, then a newspaper in Cleveland got in touch, and it started to spread. We thought, 'you know, Kaleb's not gone, but he's gone. Maybe this is what we're supposed to do now.'"

This July 9 marks the third annual Kaleb McLaughlin Memorial Ride and Organ, Eye & Tissue Donation Awareness Day, which Oxender anticipates will continue growing every year. Proceeds from the event benefit the Pioneer Fire Department First Responders, FFA scholarships, Community Tissue Services of Toledo and the Donate Life Educational Vehicle, which provides a

virtual tour of the organ donation process from beginning to end.

"Kaleb wore his heart on his sleeve and would do anything for anyone," Oxender says. "It's no surprise that he continues to help others even after his death!"

THE GIFT THAT KEEPS GIVING

Because McLaughlin died at the scene of the accident, his vital organs could not be used. Many people don't realize that in order to donate vital organs — heart, kidneys, lungs, liver — the donor needs to still have a heartbeat.

"When you don't have a heartbeat, those organs aren't getting oxygen. Without oxygen, vital organs deteriorate really fast, even within minutes. And once the organs are damaged, there's no way to revive them," explains Barb Rash, RN, director of nursing, Emergency Department, at Community Hospitals and Wellness



The gift that keeps giving

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When Tomi Zuver (left) learned that Tom Traxler (right) needed a kidney during the 2015 McLaughlin Memorial Ride, she got tested right away and discovered she was a perfect match. Within months, Tom got his new kidney from Tomi, which they jokingly call "Tom Tom."



< Each summer, the community gathers to honor Kaleb McLaughlin's memory and the gift he provided to numerous organ recipients. Pictured left to right are McLaughlin's family: Bailey, Jacob and baby Liam McLaughlin; Kim, Kevin and Rachel Oxender with dog Millie; Lauren Burkett, Logan and baby Carter Oxender.

Centers (CHWC). "Corneas, skin, bone are more stable and don't deteriorate as fast. They are used for bone and skin grafts, things like that. People would be surprised at how many surgeries right here in Bryan use donated tissue, bone and skin."

Brigitte Schrickel, RN, director of nursing CHWC Surgical Services adds, "Bone and skin grafting are used in Bryan on a sometimes daily basis. We use bone to fill in gaps when someone has a bad fracture and we're putting the bone back together. Tissue is used for tendon repairs. Podiatry and wound care use placental membrane from live donors for healing. Without these types of donations, so many people would be unable to heal and return to an active life. Just one person's donation can help hundreds of people."

A CRUCIAL CONVERSATION

When it comes to organ and tissue donation, the most important thing is to have the difficult conversation with family before it becomes an urgent necessity. "Have that conversation as soon as possible, before someone gets sick or hurt," Rash advises. "It's much better to have that conversation and everyone knows what one another's wishes are when emotions aren't high."

Oxender and her family can relate. "It's so important to tell your family about your wishes," she says. "In Kaleb's case, it happened so fast. He had it on his driver's license and he was registered to donate. But what if we didn't know? People think they can just register next time they visit the BMV... but what if there isn't a next time?"

DID YOU KNOW?

- » Nearly 124,000 people are awaiting organ transplants in the U.S.
- » More than 1 million tissue transplants are done each year.
- » Anyone can be a potential donor; a person's medical condition at the time of death determines what can be donated.
- » Donors can have an open casket and will not look any different at the funeral.
- » Donating organs and tissues does not cost donors or their families anything.
- » In the state of Ohio, hospitals are required by law to contact the organ procurement agency on every death and when a critically ill or injured patient arrives who is unlikely to survive. Donation can still be declined if it's against the wishes of the deceased or the family.



HOW TO REGISTER FOR ORGAN, EYE AND TISSUE DONATION?

Visit donatelife.net and click Register Now.

DEPARTMENT SPOTLIGHT

BREATHE EASY WITH RESPIRATORY CARE



he respiratory therapy team at Community Hospitals and Wellness Centers (CHWC) works with numerous departments throughout the hospital to serve patients with a variety of pulmonary and cardiac problems.

“The heart and lungs work hand-in-hand so treating one affects the other,” explains Jeremy Stevens, CHWC respiratory therapist. “If the heart’s not pumping blood effectively, your lungs are trying to play catchup. Cardiac plays right in with what we do and a lot of people don’t realize that.”

From the ER to intensive care to post-op, the 24 certified respiratory therapists on staff at CHWC are always on the move to provide treatments to patients who are experiencing lung and heart problems.

“We most commonly treat patients with COPD (chronic obstructive pulmonary disease) and congestive heart failure,” says Jim Coolman, CHWC director of respiratory therapy. “One big thing that’s necessary in our field is good patient-assessment skills so that we can put each patient on the best

program for them, that will benefit them and speed up the recovery process. What works for one person may not work for another, even if they are experiencing the same problems. Everyone is different, so those patient-assessment skills are crucial.”

Smoking is a huge issue in the world of respiratory therapy, says Coolman. “The statistics don’t lie. Smoking causes all kinds of serious illnesses. Quitting is one of the most important things people can do for themselves, to improve their health.” Coolman also notes that a healthy diet and adequate exercise can help people avoid heart and pulmonary problems from the get-go, adding, “The healthier they are, the better off they are overall.”

At least one respiratory therapist is on staff at both Montpelier and Bryan

Hospitals at all times, as they are frequently needed in the Emergency Department.

“There’s a lot of adrenaline involved in our field,” says Stevens. “When a patient arrives at our ER, we step in right away to get the heart beating and their breathing in order. I’ve heard from a number of patients that there’s nothing scarier than not being able to breathe. Helping them through those scary moments is very rewarding.”

Director of Respiratory Therapy Jim Coolman adjusts equipment for volunteer Sharon Mesnard.



Community Health Assessment makes improvements possible



Every three years, Community Hospitals and Wellness Centers (CHWC), the Four County ADAMhs Board and the Williams County Health Department conduct an assessment to analyze health and safety factors that impact local adults and youth.

The latest Community Health Assessment will be released this August, after more than 500 adult surveys and 436 youth surveys were returned and analyzed. The surveys cover topics that range from exercise habits to mental health to substance use to violence. They are voluntary and anonymous; participants are asked to answer honestly and skip questions they are unable or uncomfortable answering so that accurate data can be collected.

Based on the assessment's findings, various entities within the county such as schools, the sheriff's department, Job and Family Services and others work together to determine what issues they will focus on in a coordinated effort to improve the quality of life in Williams County.

IMPLEMENTING IMPROVEMENTS

Upon the last report's release in 2013, obesity was chosen as an ongoing issue to tackle in phases. Health Commissioner Jim Watkins states that obesity has been a struggle to get in front of. "We can't expect to see much change in just three years," he explains, "but as long as we continue on this track, we do anticipate seeing change, hopefully, over time."

Obesity has been addressed in schools, for example, through the MyPlate program, which strives to educate and encourage healthy habits by choosing the right portions of nutritious foods. At the time, parents reported three big barriers to healthy eating: cost, convenience and taste. "Life is hectic," Watkins says. "When your kids are involved in all kinds of activities and you have to grab something quickly, those unhealthy foods are way too convenient."

Additionally, local businesses that offer employee wellness and insurance incentive programs have doubled since 2013, more fresh produce is used at food markets, and SNAP and EBT use has grown at farmers markets.

Another initiative that started in 2013 was to encourage more adults ages 65+ to get the influenza vaccine each year. The Centers for Disease Control and Prevention (CDC) notes that this population is at much greater risk of serious complications from the flu. In recent years, the CDC says, it's estimated that between 80 and 90 percent of seasonal flu-related deaths have occurred in people 65 years and older, and between 50 and 70 percent of seasonal flu-related hospitalizations have



Local businesses that offer employee wellness and insurance incentive programs have doubled since 2013, more fresh produce is used at food markets, and SNAP and EBT use has grown at farmers markets.

occurred among people in that age group. Improvements have been observed in this area over the past three years.

RISKY BEHAVIOR ANALYZED

The youth component of the assessment is especially eye-opening, says Watkins. In 2010, for example, approximately 70 percent of youth, ages 16–18, admitted to texting while driving. Watkins attributes this to the very different way youth process risk and danger, compared to adults. The challenge, then, is to reach them in a way that makes an impact.

To that point, Watkins describes how messaging has changed over the years to discourage tobacco use among youth, "The message they give to adults is about the risk of cancer, but youth see that as being so far down the road it's not even on their radar. So the message became about youth being manipulated by the industry and by adults. That approach worked so much better because they didn't like to feel manipulated, and they rebelled against it." This messaging, along with higher cost and raising the minimum age for sale of tobacco products, has been attributed to the decline of tobacco use among youth in recent years. Still, the CDC reports an increase in the use of other tobacco products, such as electronic cigarettes.

WHAT'S NEXT?

When the final report is completed, it will be made available on a number of local agencies' websites, including chwchospital.org and williamscountyhealth.org. A release meeting will also be held, open to the public, in late summer. "We want this information to be accessible to residents so they know what the issues are. We hear all the time about national trends, but our question is, 'what's happening here?'" Watkins says. "We hope that when this information is in front of people, it will not just inform them, but help them make better choices."

80 YEARS OF HOSPITAL CARE IN WILLIAMS COUNTY

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016 is a milestone year for hospital care in Williams County. In April, we recognized 80 years since Don Cameron, MD — who founded Cameron Hospital in Angola, Indiana in 1926 — opened Cameron Hospital in Bryan.

In 1945 the eight northern townships of Williams County formed a hospital district, whose leaders proposed a tax levy that would fund the construction of a hospital in Montpelier. The levy was successful, and Williams County General Hospital was dedicated June 22, 1952.

A group of bright and talented leaders in the 1930s and 1940s had the vision to bring modern hospital facilities to northwest Ohio. The two hospitals operated independently of each other until 30 years ago, in June 1986, when they merged into Community Hospitals of Williams County. The combining of hospitals brought about more efficiencies and resources to expand services. In 1998 the Archbold Medical Center opened, and we changed our name to Community Hospitals and Wellness Centers (CHWC).

The advancement of health care in northwest Ohio was accomplished by people who held a strong sense of pragmatic independence. These were the right decisions. Not emotional, but practical. Not selfish, but selfless. Today, the CHWC Board of Directors is as pragmatically

independent as ever. Their goal is to sustain our independence because they believe that a locally controlled hospital will be more sensitive and more responsive to the communities we serve.

Our hospital family does not have any sense of entitlement; we know full well people have choices in health care. We want to be your neighbors, your family, your friends. And we want to take care of you with the highest respect and a commitment to highest quality. We celebrate our successes, we learn from our mistakes and we represent all that is good in an independent community hospital.

Phil Ennen
Chief Executive Officer



Community Hospitals and Wellness Centers
BRYAN | MONTEPELIER | ARCHBOLD

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



Bryan Cameron Community Hospital, 1936



SAVE THE DATE

22ND ANNUAL FOCUS ON HEALTH EVENT:
COLORECTAL CANCER PREVENTION & HEALTHY LIVING

- » Tuesday, October 11, 2016, at 6 p.m.
- » Bryan Eagles, 221 S. Walnut St.

Featuring a guest speaker who will address colorectal screening and healthy living tips. Participants will receive a light dinner, a cooking demonstration with samples and a small cookbook containing healthy recipes.

From left to right: Candy Scribner, public health nurse with Williams County Health Department; Kim Owen, CHWC Radiation Oncology Center director; Jan David, vice president for Patient Care at CHWC

