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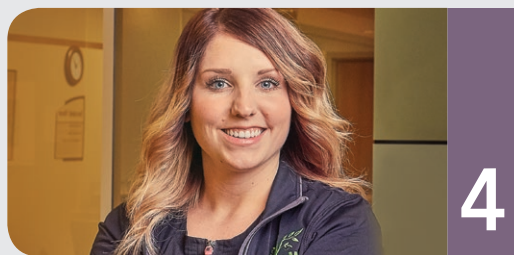
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COVER PHOTO: Ashtin Miller, WOCN, demonstrates negative pressure wound therapy, commonly called wound vac.

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Cath lab all-stars

FOUR STARS OUT OF FOUR IN SAVING LIVES

The adult cardiac catheterization lab — also known as the cath lab — may not be the most high-profile room in the hospital, but at Community Hospitals and Wellness Centers (CHWC), it's receiving some hard-earned recognition since being awarded four stars out of four by the National Cardiovascular Data Registry (NCDR®), part of the American College of Cardiology.

WHAT HAPPENS IN A CATH LAB?

The cath lab gets its name from the tiny flexible tubes — catheters — that are used to perform diagnostic heart tests and interventional cardiology. It has special imaging equipment that shows how well blood is flowing to and from the heart. Interventional cardiologists perform angioplasty and stent procedures to treat heart disease by improving the flow of blood through the arteries. People may come to the cath lab for a scheduled heart procedure, or arrive there as the result of a heart attack.

TIME IS MUSCLE

One critical measure, known as “door-to-balloon” time, is a team effort between the emergency room and the cath lab. This nationwide standard measures the amount of time from when a heart attack patient comes through the door of the hospital — typically through the emergency room — to the moment a catheter is inserted and a balloon is inflated to open an artery for stenting.

Becky Weaver, RN, and ICU Supervisor, urges patients to come to the emergency room if they believe they're experiencing heart attack. “Time is muscle,” explains Weaver,

“because the longer you wait to come in, the more damage to the heart muscle.”

Achieving a low door-to-balloon average time has been the result of interdepartmental team efforts. The team looked at every stage in the process and ways to shave off time while maintaining patient safety and quality care. “We are really proud of this measurement,” says Weaver, “because it means we are offering lifesaving heart care 24-7-365.”

EDUCATION BEGINS UPON ARRIVAL

After every angioplasty and stent procedure, patients are prescribed one or more medicines to prevent complications and promote a heart-healthy lifestyle. The prescribing guidelines are evidence-based, and if patients do not comply there can be serious consequences.

“We give very specific discharge education from the time patients arrive until the time they leave,” Weaver says. “It really is a team approach. Every person the patient encounters during their visit provides them with consistent discharge information according to American College of Cardiology guidelines.”

The cath lab, emergency and intensive care team continuously measures, audits and evaluates their work to improve the patient experience. “We found that educating both the patients and families is key. Taking medication properly is just one part of a heart-healthy lifestyle,” adds Weaver.



FOR MORE INFORMATION on the cath lab at CHWC visit
chwchospital.org/cardiology/cardiac-catheterization.



Feeling the burn?

HEARTBURN TREATMENT IS ON THE MENU.

Chronic heartburn is more than a painful mealtime nuisance; left untreated, it can cause serious health issues. Gastroesophageal reflux disease (GERD) — typically referred to as heartburn or acid reflux — is caused when the valve between the esophagus and stomach malfunctions, allowing acid and stomach contents to back up into the esophagus and cause burning and regurgitation.

Common symptoms of GERD may include:

- » Chest pain
- » Regurgitation
- » Nausea
- » Bloating
- » Chronic sore throat
- » Hoarseness
- » Bad breath
- » Belching
- » Chronic cough
- » Gagging
- » Difficulty sleeping

Left untreated, GERD can lead to serious health problems such as esophagitis (inflammation of the esophagus lining), narrowing of the esophagus (stricture), ulcers, difficulty swallowing, bleeding of the esophagus, pneumonia and esophageal cancer.

SHOULD I GET TESTED?

Although many people suffer from heartburn occasionally, some experience frequent acid reflux that causes uncomfortable symptoms and could lead to serious health problems. If you answer “YES” to two or more of the following, ask your doctor about getting tested for GERD.

YES NO

- ☐ ☐ I get heartburn after a meal or at night often.
- ☐ ☐ My heartburn gets worse when I bend over or lie down.
- ☐ ☐ Over-the-counter heartburn medications such as acid reducers or antacids help the burning go away.
- ☐ ☐ I take over-the-counter heartburn medication regularly.
- ☐ ☐ I frequently regurgitate (burp up) my food.
- ☐ ☐ There is a bitter or sour taste in the back of my throat.

GERD TREATMENT AT BRYAN HOSPITAL

The heartburn treatment program at Bryan Hospital works with patients to create an individualized treatment plan that may include: patient education, lifestyle modifications to reduce symptoms and medical and/or surgical options. Our experienced and extensively trained nurses are, above all, patient advocates who provide care in a coordinated fashion that makes it convenient, easy and supportive for patients and their families.

GET STARTED

There are a few ways you may choose to begin evaluation for GERD.

- » Discuss with your primary care provider, who may evaluate your symptoms and/or refer you out.
- » Call the heartburn treatment nurse at Bryan Hospital at **419-633-7593** who can help coordinate appointments.
- » Make an appointment with a participating physician:
 - › **Dr. Stenneth Adams, General Surgery**
Parkview Physicians Group in Bryan **419-636-4517**
Parkview Physicians Group in Archbold **419-445-2015**
 - › **Dr. Matt Cooley, Gastroenterology**
Bryan Hospital **419-630-2021**
Archbold Medical Center **419-446-3019**
 - › **Dr. Michael Liu, General Surgery / Colorectal Surgery**
Parkview Physicians Group in Bryan **419-636-4517**
Parkview Physicians Group in Montpelier **419-485-6100**
 - › **Dr. Michael Nosanov, ENT, Sinus & Allergy**
Bryan Hospital **419-633-7389**
Archbold Medical Center **419-446-3047**
 - › **Dr. Anselm Tintinu, General Surgery**
Parkview Physicians Group in Bryan **419-636-4517**
Parkview Physicians Group in Archbold **419-445-2015**

Treatments

Specialty-certified nurse heals at Wound Care Solutions

Diabetic foot ulcers, edema, lacerations and burns are just some of the wounds that are treated at Bryan Hospital's Wound Care Solutions. A recent addition to the wound care team is Ashtin Miller, WOCN (wound-ostomy certified nurse), who joins Dr. George Magill, Licensed Practical Nurse (LPN) Keith Lehsten and Medical Assistant Karrie Turner at the clinic. Miller has a Bachelor of Science in Nursing (BSN) and had worked for two years at Bryan Hospital in the Medical Surgical Department before joining the wound clinic in June 2018 and completing her wound-ostomy certification in December.

HEALING WOUNDS

With the right treatment, injuries and wounds typically heal without a problem, but some wounds may require special care — such as diabetic foot and leg ulcers, pressure and venous ulcers, edema and lymphedema, burns, lacerations and surgical wound complications.

People with diabetes make up a significant portion of the patient population at the wound clinic, because those patients deal with a unique set of issues. “Diabetes that is uncontrolled can lead to loss in sensation, many times, in the feet. When this happens, injury can occur by stepping on a foreign object or from friction while walking,” Miller explains.

The wound clinic is successful in healing wounds and establishing long-term plans to prevent future problems — notably with diabetic ulcers and venous ulcers. Individualized plans for wounds and ulcers can include anything from negative pressure wound therapy, total contact casts, compression wraps, hyperbaric oxygen therapy and more.

Miller states that, “Education is huge in preventing issues down the road. People may think once they're healed, they're done. But a lot of times, unfortunately, people will have to manage these problems for the rest of their lives. We are able to help each individual figure out what they need to be successful with it.”

OSTOMY SUPPORT

Along with providing treatment for wounds, Miller is also certified for ostomy care. “It's good to have an ostomy nurse because an ostomy is a hard thing to deal with. I would have a really hard time



copied if I had to have one. It's rewarding to be that resource, to help patients find ways to decrease their symptoms and learn how to put on a new appliance and how to get the right one,” she says.

Indeed, Miller is a resource to patients and doctors alike. “When doctors get a patient they know will need an ostomy placed surgically, I can assist in marking the best site for the patient, considering their bodies and their clothing so it's as comfortable as possible for them,” she says. “I'm an advocate for the patient: I can be there before surgery, I can follow up with them in the hospital and they can come see me afterward.”

WOUNDS OF ALL KINDS

There are many kinds of wounds that can be treated at Wound Care Solutions, and Miller urges people who have concerns to get it taken care of before it becomes a serious problem.

“It's important for people to know that if they are having problems, they don't need a referral and they should call us. It's better to get it looked at and we can see what's best, whether we only see them once or we refer them out, or we begin a more extensive treatment plan.”

Healing



Wound Care Solutions at Bryan Hospital

"It's important for people to know that if they are having problems, they don't need a referral and they should call us. It's better to get it looked at and we can see what's best, whether we only see them once or we refer them out, or we begin a more extensive treatment plan."

— Ashtin Miller, Wound-ostomy Certified Nurse of
the Wound Care Solutions at Bryan Hospital.

CONTACT WOUND CARE SOLUTIONS

by calling **419-633-3420**,
or learn more by visiting
chwchospital.org/wound-care.



Wounds

Ashtin Miller, Wound-ostomy Certified Nurse of
the Wound Care Solutions at Bryan Hospital.

CANCER PROGRAM GRANTED elite status by CoC

With emphasis on supporting patients and caregivers through personalized, state-of-the-art care, the cancer program at Community Hospitals and Wellness Centers (CHWC) works to develop and promote education on cancer prevention, early detection and screening. In 2018, the program was granted elite status from the American College of Surgeons Commission on Cancer (CoC) after a perfect survey, accrediting the program through 2021.

SCREENING IS A PRIMARY FOCUS

CHWC Compliance Officer Cathy Day, who is a breast cancer survivor, is a key player within the cancer program. She notes that every year, CHWC staff are looking at ways to improve their program, and a big focus in 2018 was on increasing screenings within the community.

"It's so important to get those regular screenings done because it's curable if caught early," Day says, considering her own personal experience. Day has long been an advocate for regular cancer screening; she gets a mammogram every August, and performs monthly self-exams without fail. It was a shock, then, when she

was diagnosed with stage 3 breast cancer in August 2016. "The tumor was deep enough that I didn't feel it, but they found it on a screening mammogram," she explains. "Feeling good isn't an indicator that everything is okay; it doesn't mean anything. I'm a great example of this, because I had no idea this was going on in my body."

INTRODUCING THE COLOSSAL COLON

Colorectal cancer is a major issue in Williams County and neighboring counties, but in 2016, only 52 percent of adults who met the criteria were being screened for colorectal cancer. That's why, last spring, CHWC purchased the "colossal colon," a large blow-up colon that people can walk through and view large renderings of normal colon tissue, Crohn's disease, polyps, malignant polyps, colon cancer and advanced colon cancer. The colossal colon is used at events along with screening kits and information to encourage more people to get their screenings done.

A TEAM EFFORT

Although Bryan is a small town, there is no lack of quality cancer treatment. Cancer care is a team effort at Bryan Hospital, from board-certified surgeons, medical and radiation oncologists, radiologists, pathologists and oncology-certified nurses to social workers, therapists, dietitians and more. Patients going through cancer treatment often note how beneficial it is to have this level of quality care close to home.

Day says she'll be forever grateful that she could get chemotherapy and radiation in Bryan, adding, "I can't imagine having an hour-long drive after a chemo dose. To me, it would have been impossible."

CANCER SCREENING GUIDELINES

Women ages 20+	Breast self-exams
Women 20-39	Clinical breast exams (CBE) at least every 3 years
Women ages 40+	Annual CBE and mammography
Women ages 21-65	Pap test and HPV DNA test. Women who have had a hysterectomy should stop cervical cancer screening.
Men & women ages 45+	CT colonography every 5 years and fecal occult blood test annually or stool DNA test every three years or flexible sigmoidoscopy every 5 years or dbl-contrast barium enema every 5 yrs or colonoscopy every 10 years
Current or former smokers ages 55-74 in good health with at least a 30 pack-year history	Low-dose helical CT (LDCT)
Men ages 50+	Prostate screening: talk to your primary care physician



Urology Clinic improves confidence with ED treatment

Erectile dysfunction is a topic most people shy away from, but urologist Dr. Daniel Murtagh Sr. speaks frankly and openly about it, having treated many men over the years he has been practicing medicine.

WHAT CAUSES ED?

Years ago, erectile dysfunction (ED) was largely thought to be a psychological problem, but we now know that ED is primarily a blood supply issue. “Hardening of the arteries is inevitable in the American diet — we all get hardening of the arteries to a certain degree — but the penile arteries are really small and are affected early on,” Dr. Murtagh says.

This can cause an episode of ED, which he calls “devastating” to men. “It can impact self-esteem and self-worth because it’s tied to masculinity,” Dr. Murtagh adds. “There can be a snowball effect that starts as a vascular problem which then gets in their head and the next time they have a sexual encounter, they are concerned it will happen again and it becomes performance anxiety.”

Anxiety can impact the relationship as well. “From the spouse or partner’s perspective, it becomes, ‘well maybe I’m not as attractive as I used to be,’ or, ‘maybe there’s somebody else.’ It can really pull a couple apart,” Dr. Murtagh explains.

TREATMENT IS AVAILABLE

When Viagra first became available in the late 1990s, it revolutionized ED treatment, returning self-confidence to men. “I became very busy when Viagra hit the market,” Dr. Murtagh says, noting that there are now more affordable generic medications since



Patty Kunkle, LPN (left); Bralyn Martin, MA (back center); Jessica Hatlevig, LPN (front); and urologist Dr. Daniel Murtagh, Sr. (right).

 **TO MAKE AN APPOINTMENT** with Dr. Murtagh for any urology-related issues, call **419-633-7596** or get more information at chwchospital.org/urology.

Viagra came off its patent. If oral preparations aren’t right for a particular person, there are other methods that are often more cumbersome and less convenient but still effective for people who need them.

Couples coaching is also a component to ED treatment that one may not expect, but Dr. Murtagh finds necessity in working with couples to help them establish quality time together that can vastly improve their sex lives.

COMMONALITY & RISK FACTORS

ED is an extremely common issue that affects as many as 30 million men. Incidence

increases with age (most men who experience ED are ages 50+), but there are other risk factors that can cause ED. This includes high blood pressure, cardiovascular disease, diabetes, high cholesterol, obesity, smoking, alcohol and drug use, and more.

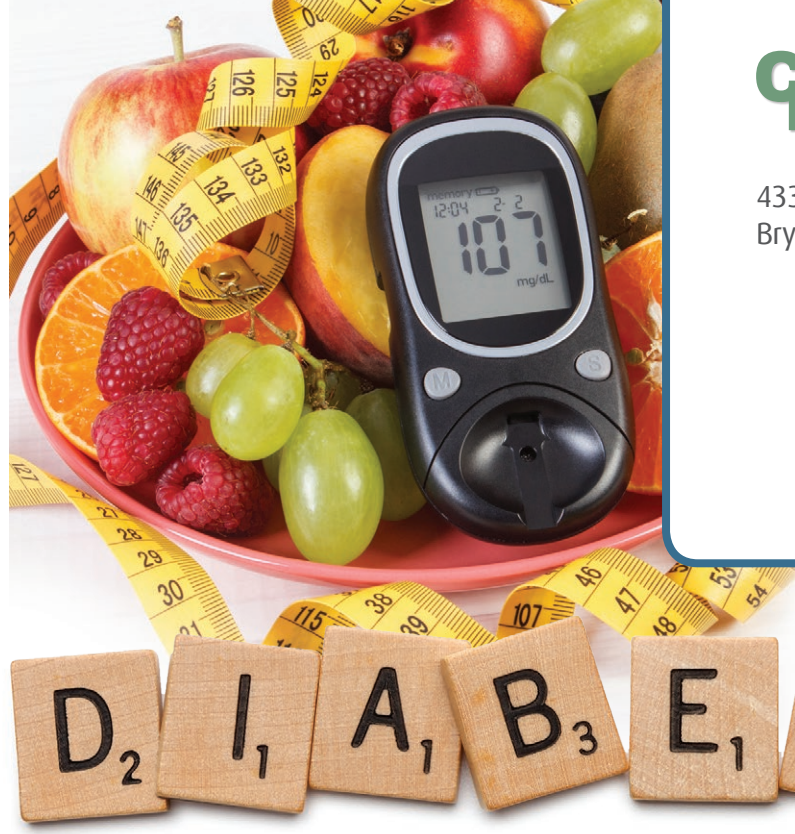
“Smoking is a huge problem. People understand that smoking puts them at risk for all kinds of issues like heart attack, cancer, stroke and they ignore it. Tell a young man that smoking can cause early onset erectile dysfunction and now he’s paying attention,” Dr. Murtagh says with a chuckle.

Treatment is Available



Community Hospitals and Wellness Centers
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Bryan, OH 43506-1690



PROGRAM EARNS RECOGNITION FROM ADA

Diabetes can be a difficult disease to manage, as it requires special attention to diet and physical activity to prevent serious issues. The diabetes self-management program at Community Hospitals and Wellness Centers (CHWC) recently earned renewed recognition from the American Diabetes Association for its success in providing a highly effective, quality diabetes education program.

OUTCOMES SPEAK VOLUMES

Registered Dietitian and Certified Diabetes Educator Tara Spisak oversees the diabetes self-management program at CHWC, which is broken down into six sessions that include one-on-one sessions, group classes, a program completion session and yearly follow-up.

"It's a great overview of diabetes: we discuss exercise, medications, blood glucose testing, low blood sugars, high blood sugars, sick day management, other educational topics and a food component that includes basic carb counting, heart health, low sodium, reading food labels and going out to eat. It's a lot of information, but we spread it out so people retain it and learn as they go along through the program," Spisak says.

She calls the outcomes from people who complete the program "amazing." The ultimate goal, she explains, is for people's blood sugars improve. To do this, they track A1C, which is a three-month average of blood sugar. "A lot of times, a newly diagnosed patient will have a high A1C at like, 10-13, but the standard is to be below seven," she says. "They come to us with really high numbers but by the time they complete the program within six months to a year, they are at a six. That's a huge drop." She adds that the lifestyle changes people

adopt throughout the program also help them improve their cholesterol levels, lose weight and become more physically active.

EDUCATION IS CRUCIAL

According to Spisak, people are frequently misinformed about how to manage diabetes, so education is of utmost importance. "So many people think they have to completely cut out carbs, but that's not true. You need to eat balanced carbs with each meal, and portion control is really important," she says. "We get people who have been diabetic for 20 years and never got proper education. They come to us and say, 'I wish someone would have told me this sooner.'"

Spisak also notes that anyone dealing with diabetes can call and CHWC's dietitians can help generate a referral into the program. Medicare and most private insurances will cover this type of education.

SUPPORT GROUP MEETS MONTHLY

In addition to the diabetes self-management program, CHWC also has a diabetes support group that meets on the second Wednesday of each month from 10-11 a.m. in the Bard Room at Bryan Hospital. Each meeting features a topic of discussion or cooking demonstration and is open to anyone who has diabetes or has a family member diagnosed with diabetes. (Call **419-630-2167** for more information.)

TO LEARN MORE

Although a physician referral is necessary to see a dietitian at CHWC, Spisak encourages people who are interested in improving their nutrition and managing diabetes to get in touch. Visit chwchospital.org/nutrition or call **419-630-2167**.