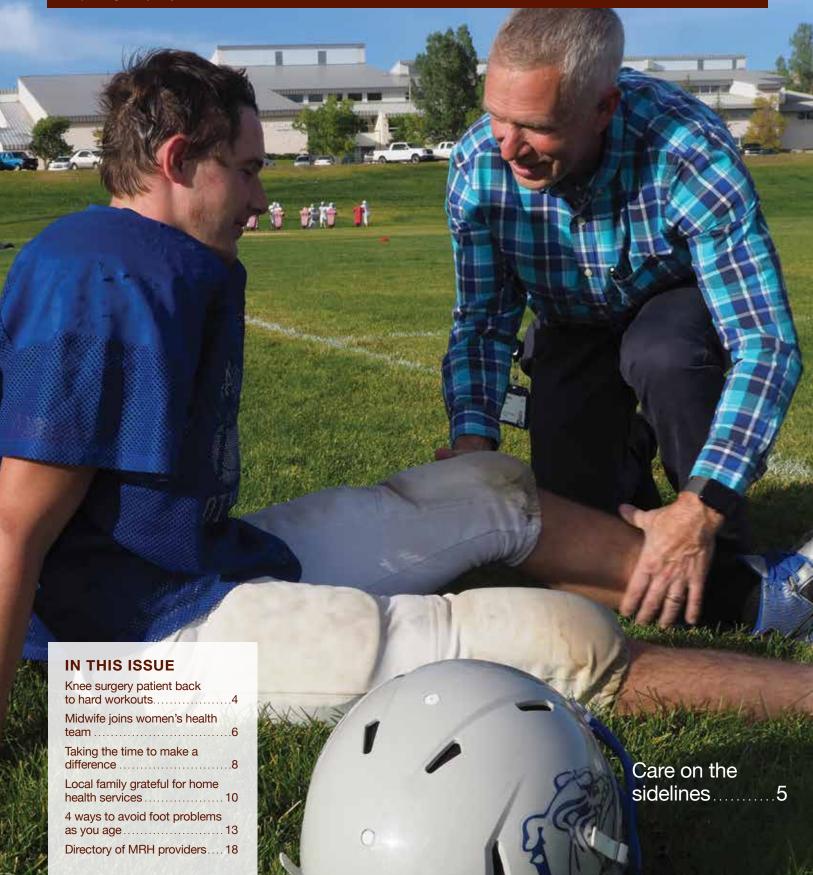


memorial regional health

LIVING WELL

Improving the quality of life for the communities we serve

Fall 2017



CEO Update



Dear Community,

We have lots of exciting things happening as we work to modernize our facilities for you, our customers. Several community members have asked, "Why a new medical office building attached to the hospital?" Good question. Let me take the time to explain the decision.

We have several driving forces for the construction of a new medical office building on the campus of our existing hospital. *First and foremost* is the age and condition of the existing facility at 785 Russell. In latter part of 2016 and early 2017, the Board of Trustees contracted with WSP-Parsons Brinkeroff to conduct a mechanical, electrical and plumbing (MEP) assessment of the "old hospital" which is currently being used to support clinic services.

The exiting 66,177 square foot building, whose construction began in 1948 with various additions built through 1983, was shown to be in complete disrepair and well past its useful life. For those of you that have friends and neighbors who work at this facility, they can attest to the on-going problems. Our first goal was actually to consider salvaging as much of the building as possible. The end result was that this was neither practical



Current Medical Clinic, in the original hospital building, 785 Russell.



Artist's rendering of future Medical Office Building, to be built on the new hospital campus, 750 Hospital Loop.

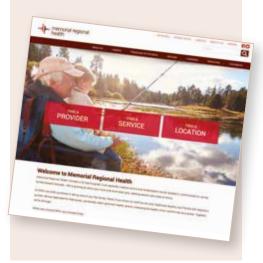
nor a responsible use of funds.

Second, building a medical office building addition on campus also has significant benefits for our patients and staff. As you know, in 2016 we renovated the former administration "suite" at the existing hospital and brought our OB/GYN providers on-site. The reason for doing this was due to observed workflow issues in which our providers would be at the off-site

continued on page 3

Check out our New Website!

We've updated, enhanced, modernized and all around improved our website. It's more user friendly and interactive, with more information at your fingertips. Visit memorialregionalhealth.com, offered in both English and Spanish.



MRH Board of Trustees

Todd Jourgensen, Chair

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Don Myers

Cover photo: Dr. John LeBlanc provides sideline care to one of the MCHS football players.

CEO Update continued

clinic with scheduled patients and then get called to the hospital for a laboring patient. The result would be "cancelling" clinic visits in order to be on-site at the hospital to monitor patients in labor. The flexibility of being on campus allows our OB/GYN providers the ability to go between both labor and delivery at the hospital and still retain clinic schedules. This has been a boost in both provider and patient satisfaction. We believe that other providers will see the same benefits when the new medical office building is located on campus. We can see very similar benefits for our orthopaedic group, general surgery, internal medicine/cardiology, primary care, pediatrics, podiatry, etc.

Third, having PT on campus will also increase the efficiency for staff who travel between the downtown location and the main campus to provide in-patient therapy. The goal is to be more of a "one-stop-shop" for many services.

Lastly, while subjective and hard to measure, we believe that a modern facility will continue to help us recruit and retain new providers to the area. Like most employees, providers want to work in a pleasant environment and we believe that our vision and promise of new medical office building has been key in our recent recruiting success.

We are in the process of completing our financing. We expect that we will get a funding commitment before our intended ground-breaking in the spring of 2018. The overall plans are now complete and "detailed design" is also almost complete. We will be "bid ready" by the end of this year.

Should you have questions, please do not hesitate to ask.

Sincerely,

Andrew J. Daniels, MHA, FACHE Chief Executive Officer

India J. Daniels

Walk-In Clinic



Artist's rendering of future Walk-In Clinic, coming this spring.

Last summer, the Memorial Regional Health Board of Trustees approved a lease agreement with Springfield Properties Group, LLC to build a more centrally-located Walk-In Clinic.

With our expanded hours and Saturday coverage, this location will provide even greater convenience and accessibility to area residents.

The new Walk-In Clinic will be located at 2020 W. Victory Way, and will be constructed on the land purchased by Memorial Regional Health in 2016. The new building will be approximately 6,285 square feet. MRH intends to relocate the current Convenient Care Walk-In Clinic currently located at 785 Russell Street as part of the strategy to vacate the old, original hospital building.

Watch for the opening in late spring 2018!

KC Hume's Back to Hard Workouts After Recent Total Knee Replacement

Thanks to Dr. Kevin Borchard's Expert Care and His Own Self-Motivation to Heal Quickly

If you know longtime Craig resident KC Hume, you know it's no surprise that he recently competed in a CrossFit competition in Steamboat Springs and did great. You may not realize that he did so just 108 days after total knee replacement surgery.

As the elected Sheriff of Moffat County and the fire chief for Craig Fire Rescue, KC relies on his fitness to help him perform his job well. He's been an avid runner and weight lifter over the years, and more recently, a fan of CrossFit. So, when his knee started hurting while training for the Colorado Tough Mudder race in the fall of 2015, he did what every ultra-athlete wants to do—ignored it.

"I love running, so when I noticed some discomfort and pain in my knee while training, I didn't heed the advice I give others—which is seek medical care. Instead, I ignored the pain for as long as I could," KC said.

Two weeks before the race, the pain became excruciating. He knew he couldn't ignore it any longer and went to see Dr. Kevin Borchard, MRH orthopaedic surgeon, with the hopes of easing the pain so he could still do the race.

"When I asked for a steroid injection Dr. Borchard said, 'Why don't we figure out what's going on first.' I appreciated his candor and confidence, and his willingness to listen to my perspective. He ordered an MRI, which showed a significant medial meniscus tear around my knee," KC said.

KC did complete the Tough Mudder, with a steroid shot to ease the pain. Over the next several months, his knee continued to bother him, despite a custom brace, viscosupplementation (also known as rooster comb) injections, steroid injections and a knee scope by Dr. Borchard. His worsening arthritis caused by wear and tear curtailed his running career, so he turned to cross training which was easier on his knee, offered by Legion Fitness. He became passionate



KC Hume completes a 34" box jump at The Weelhouse Gym in Craig.

about it, prompting him to become a CrossFit Level 1 Trainer and a managing partner in the business, now operating as The Weelhouse.

"Eventually, nothing relieved the pain. Dr. Borchard took X-rays and said, 'When do you want to get your new knee?' My medial meniscus no longer existed. It had deteriorated to bone on bone," KC said.

On May 31, 2017, KC had a total knee replacement, also called a total knee arthroplasty, which Dr. Borchard has performed over 600 times. He uses the latest, minimally-invasive techniques and prosthetics.

Dr. Borchard performs knee replacements using a gap balancing technique with a device called Zimmer FuZion® Tensor to make sure the knee tracks correctly. He uses the Zimmer Persona® implant system, which helps reproduce the normal motion of the knee and provides improved stability.

"The range of motion is excellent with this implant system, and the stability is better than with those used in the past. Another benefit is that I can customize the knee as I'm doing surgery since it comes in different widths and thicknesses that vary by 1mm increments, making the fit more comfortable," Borchard said.

By doing gap balancing, Dr. Borchard minimizes soft tissue trauma, which lessens pain and shortens recovery time. Dr. Borchard performs both total and partial knee replacements for injuries and disease.

"KC recovered quickly because he's a highly motivated individual who wants to stay in good shape, and needs to for his work," Dr. Borchard said.

For most, recovery is generally short—usually six weeks or less to full range of motion, and three months to total recovery. Rehabilitation is essential in getting people moving again and back to their normal activities, which for KC is running again.

"I would recommend Dr. Borchard as well as MRH Rehabilitation Services to anyone needing orthopaedic surgery and rehabilitation. I couldn't be happier with the outcome. It's like it never happened," concluded KC.

We've Expanded our Ortho Team!



Dr. John LeBlanc

Dr. LeBlanc is a board-certified orthopaedic surgeon who is well known in his specialty area of sports medicine, having earned a fellowship in Sports Medicine,

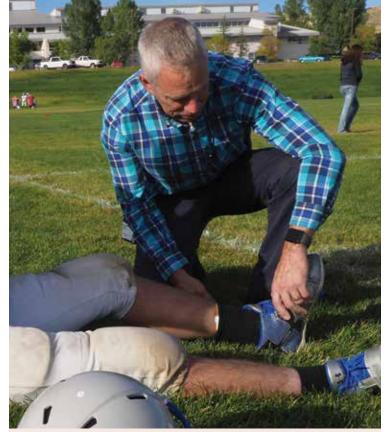
where he learned advanced skills from top surgeons and conducted specialized research with athletes, and worked with professional athletes and NCAA athletes. He also offers general orthopaedic care for a wide variety of needs.



Evan Fleming, Orthopaedic PA-C

Evan is a certified, master's trained physician assistant with strong skills, having served as a first assist for orthopaedic surgeries in

his previous position at a Level 1 trauma center. Evan brings experience in treating foot and ankle problems.



Dr. John LeBlanc, Orthopaedic Surgeon, consults with a Moffat County High School football player during practice.

Care on the Sidelines

Did you know MRH partners with the Moffat County School District to support their athletic teams? It's rare to find a high school, much less a middle school, where medical experts are at the ready on the sidelines to help assist student athletes with injury care and prevention.



Marshall Kraker, AT



Lindsey Short, AT

The MRH Sports Medicine program is made up of two Certified Athletic Trainers - Marshall Kraker and Lindsey Short. They are supported by our orthopaedic surgeons, Dr. Kevin Borchard and Dr. John LeBlanc. The athletic trainers cover most of the school district's sports including football, volleyball, soccer and basketball.

We're proud to support the Moffat County School District and local student athletes!

Expanded OB Services Mean More Options for Patients

MRH Pleased to Add Midwifery Services

For most hospitals today, having a certified nurse midwife as a part of their obstetrics team is a big bonus. That's why MRH is pleased that Liz Kilmer-Sterling, RN, MSN. CNM. Certified Nurse Midwife, has ioined our OB/GYN physicians to offer expanded services to area women. The timing could not have been better as Kilmer-Sterling arrived shortly after MRH moved women's health services



Midwife Liz Kilmer-Sterling offers care to expectant women at the OB/GYN Medical Clinic

into an expanded, more pleasant location.

Certified nurse midwives are advanced practice nurses that have earned a master's or doctoral degree in midwifery. Besides delivering babies, certified nurse midwives also provide primary healthcare for women, including wellness exams, gynecology care, birth control and prescriptions.

"Midwives traditionally spend more time with their patients, getting to know them and providing emotional support and extra education. That way, women have the information they need to make decisions about their care. When women are educated, they feel empowered, and they tend to experience less fear and anxiety about labor and delivery," Liz Kilmer-Sterling said.

Nurse midwives welcome the input of doctors, and often work collaboratively with OB/GYNs, seeking their input when complications arise. However, nurse midwives take a more low-tech, natural approach to childbirth, and aim to avoid unnecessary medical intervention.

"Certified nurse midwives believe in a woman's ability to have a healthy, normal pregnancy, labor and birth, and we educate women so they know what to expect. At the same time, we do ongoing assessments to identify potential concerns. We pride ourselves on providing high quality care with a personal touch," Kilmer-Sterling said.

MRH OB/GYN Services

Annual health & wellness exams, pelvic exams, bone density screens

Advanced 3D mammograms

Advanced laparoscopic surgery for prolapse, endometrial biopsy, hysterectomy, urodynamics and more, often done same day

Birth control consultations

Colposcopy, cryotherapy, hysteroscopy, in-office LEEP & cytoscopy

C-sections, family-centered
C-sections and complicated deliveries

High-risk pregnancies

Infertility counseling

Midwifery

Pregnancy, family-centered deliveries

Outpatient tubal sterilization

Pelvic pain/interstitial cystitis treatment

Private labor, delivery and recovery rooms with private bathrooms & tubs

3D ultrasounds

Urinary incontinence

Uterine fibroid solutions including advanced hysteroscopic resections

Incontinence: A Challenge for Women as They Age

Gynecologist Dr. Scott Ellis refers to incontinence as the "silent shame" older women feel—but it is nothing to be ashamed of, and it can often be greatly improved. You may assume the main solution to urinary incontinence is surgical, yet treatment for urinary incontinence is rich and varied—with new options being developed regularly.

"It creates silent shame because women don't like to reveal they have it unless asked. So, I make it a point to ask at every annual visit. Women who say they are incontinent often follow it with, 'I know there's nothing you can do about it.' That's simply not true." Ellis said.

Through urodynamic studies, Dr. Ellis and his partner determine just how well a woman's bladder and urethra are working, helping to pinpoint the cause of incontinence. Women suffer from urinary incontinence more than men, partly due to giving birth. Solutions may be surgical, but they may be medical and even sometimes physical, depending on the type and severity of urinary incontinence.

"While we might not be able to cure incontinence 100%, we can significantly improve a woman's quality of life," Ellis said.

Sometimes, urinary incontinence can be controlled with medications that prevent bladder spasms or calm an overactive bladder. Other times it can be treated with physical exercises that strengthen the pelvic floor or as a last resort, surgery.

Sometimes, a few, well-placed stitches make all the difference. MRH offers all types of surgeries for incontinence, including advanced laparoscopic surgeries that promise a smaller incision and faster healing time than traditional surgery. Surgical options include the transvaginal slings for stress incontinence, with newer types that are less invasive, such as the single incision mini-sling or the suprapubic sling.

Dr. Ellis also offers pelvic floor biofeedback, and uses a leading-edge technique called sacral neuro-



modulation for urge incontinence. Another exciting treatment option is periurethral collagen injections to help strengthen the muscles, connective tissue and ligaments at the base of the bladder.

Whether it is stress incontinence—that happens when you cough, sneeze or laugh—or urge incontinence—a feeling that you have to go immediately due to spasms in your bladder—or another reason for incontinence, we can help.

Incontinence

- Leaking urine when you cough, sneeze, exercise, laugh or lift
- Fast, intense urge to urinate followed by an involuntary loss of urine
- Frequent urination
- Dribbling of urine

Source: The Mayo Clinic



Local patient Sandra Kruczek is grateful for the extra attention she has received at MRH.

Specialty Clinic and Coumadin Clinic Team up to Improve Local Woman's Health

Sandra Kruczek remembers home visits from her family doctor when she was a child. He would come in with his big black bag, sit down next to her, and talk for as long as she needed before going about his doctor duties. She always felt better when he left. She was reminded of him recently when she went to see Bridget Barnhart, physician assistant for Dr. Larry Kipe, at the MRH Specialty Clinic, formerly Moffat Family Clinic.

"Bridget was able to spend the time to really look at my whole picture, and everything that is going on with me. I see a few specialists, and she pulled all the parts together. It was just what I needed," Kruczek said.

At the Specialty Clinic, Bridget Barnhart, PA-C, specializes in internal medicine and enjoys working with patients with complex issues and chronic conditions, serving as an overseer to make sure the care they receive from various doctors is coordinated. She completed extra training rotations during graduate school in cardiology and orthopaedics.

"I like developing real relationships with my patients, and seeing positive changes in their health over time. I enjoy working with the whole person and taking time to make those changes happen," Barnhart said.

Kruczek credits the care that she has received over the years from the Specialty Clinic, along with the care she has received from Karen Sweeney, Pharmacist,



Bridget Barnhart, PA-C

director of the MRH Coumadin Clinic, for feeling better than she's felt in a while.

Kruczek learned she had a heart condition a year or so ago, called A-fib. At the time, she didn't need Coumadin, but Barnhardt thought now might be a good time to start. The timing couldn't have been better, because MRH had just opened its new anticoagulation clinic, or Coumadin Clinic. People with A-fib, clotting disorders or those with mechanical heart valves are often put on a drug called Coumadin, also known as Warfarin.

"I met Karen, and I was stunned. What an education! And what an interesting clinic. I was amazed at the time she took to sit with me and discuss how it works," Kruczek said.

Taking the Time to Make a Difference continued



Karen Sweeney, Pharm D, Clinical Pharmacist with the Coumadin Clinic, meets with Sandra Kruczek to get a picture of her health before administering Coumadin.

Coumadin is a blood thinner, so getting just the right amount is vital. Get too much and you bleed, get too little and it can't do its job to prevent blood clots, which could lead to stroke. According to recent studies, people who have their medication monitored at an anticoagulation clinic have fewer recurrent blood clots and fewer episodes of major bleeding.

"Warfarin can be a potent drug, and it needs to be well managed. A big, tall man might need 1 mg while a tiny woman might need 15 mg. That's why I take the time to really talk with people. I want to learn all I can about their diet, lifestyle, other medications and health conditions, because they all have an effect. I allow plenty of time because I want people to feel relaxed enough so they can express everything to me. When that happens, we get it right," Karen Sweeney, PharmD, said.

"I've seen Karen several times so she can tweak my dose to get it just right," Kruczek said.

Sandra and her husband Ron, a small animal veterinarian, have lived in the same house in Craig since 1977.

"It's really been a life changing experience for me. Between the care I've received from Dr. Larry Kipe and his staff and the Coumadin Clinic, everything has come together. It made all the difference in my health," Kruczek said.

New Instrument Helps Detect Diabetic Retinopathy Early



Tina Livingston, RN, uses a new RetinaVue[™] machine to check for changes in her diabetic patients' eyes.

Caught early, sight can be saved.

Diabetes can affect several organs, including your eyes. When blood sugar gets too high, it can damage blood vessels in your eyes. Left undetected, it can lead to blindness. The Specialty Clinic recently purchased a Welch Allyn RetinaVueTM to catch retinopathy early. It's a simple, affordable and effective way to screen patients with diabetes at regular visits.

We're making more time for you!

Extended Hours at the Medical Clinic

Medical Clinic (By Appointment)

Mon. & Tues. 8 am – 5 pm Wed. – Fri. 7:30 am – 7:30 pm Sat. 7:30 am – 3:30 pm (alternating weeks)

Walk-In Clinic (No Appointment Necessary)

Mon. 8 am – 10 pm Tues. – Fri. 8 am – 7 pm Sat. 10 am – 10 pm







L to R: Gene Counts, Loretta Counts, daughter Donna Curtis and nurse Brittany Robinson are shown in the Counts' living room.

It was becoming harder and harder for Donna Curtis to care for her aging parents, Loretta and Earl Eugene "Gene" Counts, both in their 80s. They had several health issues and she worried about them constantly. She prayed to God to bring her an angel, and her prayers were answered in the form of a blond woman in a mint-colored uniform.

"I really did pray for an angel, and soon after we were sent Brittany. I can't put enough words together for this woman. We just love her. Knowing that she comes and that she's going to bat for my dad and mom makes me feel so much better," Curtis said.

Brittany Robinson, LPN is a practical nurse with Memorial Regional Health's Home Health Department. In June of this year, MRH purchased Centennial Home Care and is pleased to offer care to those in our community who need a little extra help to regain strength after surgery or illness, and maintain independent lives in their own homes.

"It's really rewarding to care for someone in their home and get to know them for who they are and tend to their needs. The Counts are very pleasant folks to be around," Brittany said.

"Offering home health and hospice services is really about building relationships with families in our communities, and meeting their needs," said Kristine Cooper, MHA, Director of Home Health, Hospice and Population Health for MRH.

The Counts have lived in Craig since 1949, and raised their three children on their farm where they still grow wheat and oats, and in the past, raised cattle. Loretta also sold Tupperware and Avon. Two of the children live in town, helping run the farm and provide

MRH Home Health Services

Transitional, in-home care after surgery or illness

Regain daily living skills

Establish safe home environment

Manage treatment plan and medications

Maintain independence

Coordinate multi-disciplinary care

Local Family Grateful for Home Health Services continued

care for their parents. The third, who lives in Windsor, CO, comes to help with harvest, and visit whenever she can.

"I would do anything for them. The word love is a verb, you know. Having Brittany is such a relief. She knows my dad is not a complainer. She reads him. When he says, "This could kill a guy' she knows his pain is bad," Curtis said.

Home Health providers have been seeing the Counts for the last few years. They conduct routine medical checks, communicate with

"Offering home health and hospice services is really about building relationships with families in our communities, and meeting their needs." their primary care doctor, coordinate care with specialists, manage medications, pick up prescriptions and supplies, and much more.

"We are very satisfied with the way they care for us. It's kind of been one thing after the other for us. Loretta broke her hip twice, I caught pneumonia a year or so ago. They help with all sorts of things," said Gene Counts.

Home health care is offered in the home after a hospital stay or a nursing home stay. Nurses and other members of the care team, including nursing assistants, physical therapists and occupational therapists, come to the home to help patients manage medications, learn how to move around safely in their home, adapt daily living skills to accommodate physical needs, complete treatment plan items such as strength building, provide infusions when necessary and more. The health system is working to enhance current services by adding additional staff, including a licensed clinical social worker and a speech therapist.

"A big part of what our team does is talk with patients and their families about their challenges, issues, and questions, and try to resolve these issues for them. We do a lot of listening, educating and coaching," Cooper said.



MRH Home Health Team, left to right: Brenda Soos, RN, Kristine Cooper, Director, Maria Mosman, RN, Meagan O'Connor, RN and Brittany Robinson, LPN

An individual might receive home health services

for a few weeks or for a number of months, depending on their situation. The average amount of time a person needs home health services is 60 days. Depending on the injury or illness, the patient might be seen once a week or multiple times a week from varying team members. A patient's primary care provider is given updates on how the patient is progressing, and works closely with

MRH purchased Centennial Home Care in June 2017 and worked closely with the organization to create a smooth transition for staff and patients over the summer. Adding home health to the menu of services provided by Memorial Regional Health greatly improves the quality of care from hospital to home, and improves coordination of care with providers.

nurses to ensure the best outcomes. Medicaid and Medicare cover home health services, as do some private insurance companies.

"The whole family is wonderful. I feel honored to be in the position to serve them and to help them maintain their health and navigate the healthcare system," Brittany concluded.

High Blood Pressure: Know Your Numbers

Does someone you love have high blood pressure? More than likely, as the Centers for Disease Control (CDC) reports that one in three adults in the United States has high blood pressure, medically known as hypertension.

"High blood pressure usually occurs when the elasticity in the arteries gradually decreases as the body ages and as fatty material builds in those vessels," said Dr. Gerald Myers, cardiologist.

High blood pressure has no symptoms. It's more common as we age and affects men and women equally. To stay on top of high blood pressure, know your numbers.

When you have your blood pressure taken, you are given two numbers, such as "112 over 72." The first number, the systolic, refers to the amount of pressure in the arteries while the heart is beating. Ideally, you want this number to fall under 135. The second number, or diastolic, measures the pressure in your arteries between heartbeats. This number's normal range should be less

If you have a family history of hypertension, there's a good chance you, too, will have it as you age. Fortunately, blood pressure is something that can be monitored and controlled.

than 85.



Ideally, your blood pressure reading should be around **120/80**, not exceeding 135/85.

Cardiology services are offered in both Craig and Steamboat!

MRH Specialty Clinic - Steamboat 1169 Hilltop Parkway, Suite 101A (Lower Level) Steamboat Springs, CO 80487

For Appointments: 970-826-2400



Dr. Gerald Myers, cardiologist, helps patients maintain heart health and cope with heart disease.

MRH Cardiology Services

Aneurysms

Angina

Arrhythmias (A-Fib, supraventricular tachycardia, ventricular fibrillation)

Atherosclerosis

Cardiomyopathy

Adult congenital heart disease

Congestive heart failure

High blood pressure

High cholesterol

Peripheral artery disease (PAD)

Syncope

Valvular heart disease

4 Ways to Avoid Foot Problems as You Age

Feet are the foundation of the body. They rarely get a rest as they carry us from place to place. It makes sense that they would need special care as we age.

Due to wear and tear, and a lowering of our immune response as we age, we're more susceptible to foot problems. Common geriatric foot problems include ingrown nails, corns, calluses, fungus infections, arthritis and diabetic ulcers.

1. Monitor your feet

The best way to avoid foot problems is to keep a close eye on foot issues and seek help quickly, before problems settle in. Get in the habit of inspecting your feet regularly. This is especially true if you have diabetes, as untreated cuts or fungus can lead to ulcers and infection. Use lotion to lessen cracks and dryness, and wash your feet regularly with mild soap.



Dr. Derek Harper, podiatrist, exams a patient's foot for common foot problems.

"A lot of problems that manifest with diabetes are first seen in the foot," said Dr. Derek Harper, podiatrist with Memorial Regional Health.

2. Trim your toenails regularly

Make an even cut straight across rather than curving on the edge, which could result in ingrown toenails. Don't hesitate to ask for help if it's difficult to reach your toes.

3. Wear supportive shoes

Buying supportive shoes is also important, avoiding shoes that are too narrow and too tight is a good place to start. Select shoes that have wide toe boxes, good cushioning and solid arch support. Wear moisture-wicking socks to help keep your feet dry to avoid fungal infections. Supportive shoes can also help you avoid pain in your legs.

4. Put your feet up

Finally, forget crossing your legs. Rather, put your feet up on a footstool to help maintain good circulation.

"I enjoy working with patients to come up with the best treatment plans for their foot and ankle needs," Harper concluded.

2 Locations

Craig

Steamboat

785 Russell Street

Steamboat Specialty Clinic 1169 Hilltop Parkway, Ste 101A

(970) 826-2465

MRH General Podiatry Services

Achilles tendonitis

AFO/BRACES

Ankle instability & ankle sprain

Arthritis

Athlete's foot (tinea pedis)

Bunions

Clubfoot

Diabetes & geriatric foot care

Flat feet & hammertoes

Heel spurs & heel pain

Ingrown toenails & toenail fungus

Injuries to the foot & ankle neuromas (tumors)

Orthotics

Plantar fasciitis (heel spur) & sesamoiditis

Shin splints & stress fractures

Warts & corns



If you know what a heart attack is, you can understand a stroke. Think of a stroke as a "brain attack" that occurs when blood vessels in the brain are blocked by a clot, depriving it of oxygen. Or when a blood vessel bursts in the brain.

Strokes are most common in older people with 75% occurring in those over 65 years of age, and women tend to have more strokes than men. People with high blood pressure, high cholesterol, and people who smoke are at an increased risk for stroke. Stroke is not always easy to diagnose, so having access to stroke neurologists 24/7 through the telestroke program at MRH can help us all feel more at ease. Stroke neurologists through Swedish Hospital/HealthONE diagnose quickly for fast treatment decisions, greatly benefiting patients.

Memorial Regional Health's Rehab Center helps patients recover from stroke. Stroke effects vary depending on where in the brain the injury occurred and how severe of an injury the person endured. Common effects of stroke include weakness on one side of the body, loss of coordination, having trouble sitting, standing or walking, and problems with speech or cognition.

Occupational therapists (OTs) help patients regain thinking skills and attention skills, and help reeducate the nerves and muscles in the upper extremities. By helping the brain and body reestablish neurological connections, OTs can enhance a person's independence. For example, when a stroke occurs, the brain may tell the arm to move, but it doesn't. Physical therapists help stroke patients regain strength and nerve and muscle function of the lower extremities, and help patients regain balance. The goal is to help patients get back to their pre-stroke state as best as possible.

SYMPTOMS ALERT: Stroke

- Sudden changes out of blue
- Numbness, weakness in face, arm or leg—often one side
- Confusion, trouble speaking with slurred speech
- Trouble seeing
- Loss of balance, trouble walking, dizzy
- Severe headache

Act FAST A Stroke Could be in Process!

F Face drooping



A Arm weakness



S Speech difficulty



T Time to call 911



Source: American Stroke Association

Understanding Occupational Therapy

You likely understand physical therapy, but do you know what occupational therapy is and how it's used? The purpose of occupational therapy is to help people adjust to physical changes so they can independently care for themselves in their homes.

If you've ever broken a bone, had a surgery, or experienced a stroke, you understand how you have to do things differently—even basic things like opening doors, getting in a car, and eating—at least for a while. Occupational therapy helps people adjust to alternative ways of doing the activities needed for daily living.

MRH Rehabilitation Services

Physical Therapy

Orthopaedics & manual physical therapy

Sports physical therapy & rehabilitation

Injury prevention & wellness

Specialty care for neck & back, shoulder, knee, foot, ankle

Tension headaches

Occupational Therapy

Acute care

Coping with Alzheimer's & dementia

Management strategies for progressive diseases: arthritis, Parkinson's, MS

Post-surgery training

Upper extremity & overuse injuries

Pediatric disabilities

Brain & stroke recovery

Neurological rehabilitation

Fine and gross motor coordination

Home & community reintegration

Hand therapy intervention

Visual/perception deficits

Cognitive rehabilitation



If you are a patient of MRH, it will soon be a lot easier to fill your prescriptions. That's because we're opening a pharmacy within the MRH Medical Clinic at 785 Russell Street. It's not limited to patients, so anyone can use it. The key word is convenience.

The pharmacy will also deliver prescriptions, mail prescriptions, provide drug counseling, and give vaccinations.

"Sometimes, we've run into the issue of local retail pharmacies being closed when our patients need a prescription. Our plan is to closely match the late-night hours of the Walk-In Clinic, staying open until at least 8:00 pm on certain

weeknights," said Kyle Miller, PharmD, Director of Pharmacy for MRH.

A future benefit will be what's known as Meds to Beds, meaning patients who stay at the hospital, go to the ER, or have surgery at MRH can have their prescriptions filled and ready to go at discharge, saving them a trip on the way home. There's also an option for Walk-In Clinic providers to dispense medications to patients after hours when the pharmacy is closed.

"We'll be able to maintain continuity of care and provide medications much more conveniently than in the past," Miller said.

The pharmacy will also deliver prescriptions, mail prescriptions, provide drug counseling, and give vaccinations—saving people a visit with a provider and often, money, as vaccinations received at the pharmacy are run through your prescription insurance rather than your medical insurance.

Pharmacy at Medical Clinic continued

"Two of us will be certified to give vaccinations, making it really convenient," said Ann Nichols, PharmD, Retail Pharmacy Manager.

Eventually the pharmacy will sell some retail products as well, including common over-the-counter medications, and items for diabetics. When the new medical office building is built, the pharmacy will be moved there, complete with a drive-up window. Watch for the opening of the pharmacy soon.

MRH offers Sliding-Fee Scale at the Hospital and the Clinics

Our priority is providing care to those who need it regardless of a patient's ability to pay. For more information, visit our website at **memorialregionalhealth.com**.

Memorial Regional Health Working to Build Early Relationships with Students

Last January, Moffat County School District selected Memorial Regional Health to assume responsibility for the school district's nurse and health technicians in the schools. The district renewed the agreement for another school year. "We get so much interaction with the students, I feel like we are really doing a lot for the community having both of

these entities work together. We are able to get kids care when they need it, and that's truly appreciated by the parents," said Myranda Lyons, RN, School District Nurse.

In addition to working with the Moffat County School District, MRH Pediatric Clinic nurses,



Jennifer Custer and Lisa Vannoy, work closely with the staff of Eagle's Nest Preschool. Jennifer and Lisa meet with them monthly and provide on-going training and education. They also serve as an immediate resource to staff when they have a child who becomes sick.

MRH Does not Discriminate

Memorial Regional Health (MRH) complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, sexual orientation or gender identity. MRH does not exclude people or treat them differently because of race, color, national origin, age, disability, sexual orientation or gender identity. MRH values the diversity and inclusion of our patients, their visitors, employees, physicians, volunteers, students and others.

For our full non-discrimination statement, visit: memorialregionalhealth. com/memorial-regionalhealth-non-discrimination-policy/



Did you know?

In 2016, MRH Pediatrics saw nearly

3,500 kids!

Our pediatric team consists of Dr. Kristie Yarmer, Physician Assistant Kevin Monahan, and nurses Lisa Vannoy and Jennifer Custer.

For appointments, call 970-826-2480.

Directory of Providers

Primary Care - Family Medicine



Elise Sullivan, MD

Hablo Español

American Board of Family Medicine

Appointments: 970-826-2400



Cynthia Reed, DO
American Board of Family Medicine
Appointments: 970-826-2400



Neilene Folks PA-C National Certification of Physician Assistants Appointments: 970-826-2400



Tracey Wall, PA-CNational Certification of Physician Assistants

Appointments: 970-826-2400

Walk-In Clinic



Maggie Schoeberl, PA-C Hablo Español National Certification of Physician Assistants

Main Number: 970-826-2400



Jim Zimmerman, PA-CNational Certification of Physician Assistants

Main Number: 970-826-2400



Jennifer Schmitt, PA-C National Certification of Physician Assistants

Main Number: 970-826-2400

Specialty Clinic



Larry Kipe, MD
American Board of Family Medicine
Appointments: 970-824-3252



Carol Bolt, PA-C
National Certification of Physician
Assistants
Appointments: 970-824-3252



Bridget Barnhart, PA-C National Certification of Physician Assistants

Appointments: 970-824-3252

Primary Care – Pediatrics



Kristie Yarmer, MD
American Board of Pediatrics
Appointments: 970-826-2480



Kevin Monahan, PA-CNational Certification of Physician Assistants **Appointments: 970-826-2480**

Cardiology/Internal Medicine



Gerald Myers, MD

American Board of Internal Medicine,
American Board of Cardiology

Appointments: 970-826-2400

Craig and Steamboat locations

General Surgery/Trauma



Jeff Womble, MD

Hablo Español

American College of Surgeons

Appointments: 970-826-2420

Obstetrics/Gynecology



Scott Ellis, DOAmerican Board of Obstetrics and Gynecology

Appointments: 970-826-8230



Liz Kilmer-Sterling, RN, MSN, CNM Certified Nurse Midwife Appointments: 970-826-8230

Orthopaedics



Kevin Borchard, MDAmerican Board of Orthopaedic Surgery

Appointments: 970-826-2450



John LeBlanc, DONational Certification of Physician
Assistants

Appointments: 970-826-2450



Evan Fleming, PA-CNational Certification of Physician Assistants

Appointments: 970-826-2450



Jarod Schoeberl, PA-CNational Certification of Physician
Assistants

Appointments: 970-826-2450

Podiatry



Derek Harper, DPM
Appointments: 970-826-2465
Craig and Steamboat locations



750 Hospital Loop Craig, CO 81625 (970) 824-9411 PRSRT STD ECRWSS U.S. POSTAGE PAID EDDM RETAIL

PO Box Holder Craig, CO 81626

Upcoming Events at MRH



Our Medical Clinics' Holiday Hours

Wednesday, November 22nd - Closing at 5:00 pm Thursday, November 23rd &

Friday November 24th - Closed

Saturday, November 25th -

Medical Clinic 7:30 am - 3:30 pm Convenient Care 10:00 am - 5:00 pm

Friday, December 22nd - Closing at 5:00 pm

Saturday, December 23rd - Closed

Monday, December 25th - Closed

Monday, January 1st - Closed



March 1 – 31

March into Health

Mon – Fri, 6 am - 10 am

Memorial Hospital Lab

Blood draws leading up to

April Health Fair.



COMING IN EARLY APRIL

MRH Community Health Fair



