СМН CMPASS DEVOTED TO HEALTHFUL LIVING SPRING 2015 L-STAR TEAM Service is a way of life for CMH caregivers.

Pg 6

#### **URGENT CARE**

Help when you need it.

Pg 3

#### TIME FOR YOU

Join in our health events.

Pg 11



#### What Planetree means to me

Whether you've been following Columbia Memorial Hospital (CMH) through the Compass or you've had a personal experience with our care team, you may be familiar with the word "Planetree." If this term or its meaning is unfamiliar to you, we'd like to explain how Planetree is making a difference here at CMH.

As vice president of Patient Care Services, my focus is to ensure that your experience in any of our facilities, both the hospital and its



**Trece Gurrad** Vice President of Patient Care Services

community clinics, is an exceptional one. Personally, I am responsible for leading and overseeing over 30 initiatives and programs designed to ensure that each patient's very specific needs and expectations for care, service and communication will be surpassed.

Our Planetree mission at work includes the appointment of the CMH Quiet Heals Task Force. The task force explores innovative ways to ensure that the areas around inpatient rooms are quiet. With the help of technology, we have added a device called a "Yacker Tracker." This unit provides us with a visible silent alert to let us know when noise levels have risen above an acceptable level. Additionally, the group has conducted a facility-wide sound assessment and is now working with our Healing Services Team to explore noise-absorbing

To me, Planetree represents abundant opportunities to improve the quality of care and service to our community.

Stece Ruhlad

Trece Gurrad, Vice President of Patient Care Services

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For information about CMH HEALTH COMPASS:

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### Inside & Online

#### **HEALTH COMPASS**

#### SHOO THE "ACHOO!"

Don't let spring, and the pollen it brings, get the best of you. Learn ways to keep allergies at bay.

#### ALL-STAR CAREGIVERS

Meet two members of the CMH team who are service-oriented leaders in our community.

CONSTANT COMFORT Lower Columbia Hospice, a CMH affiliate, is dedicated to providing end-of-life care for you or your loved one.



#### **ONLINE**

#### Recipe redo

HEART-FRIENDLY SWAPS TO SAVOR

Sometimes one small change can drastically cut cholesterol and fat in a favorite dish. Here are seven substitutions every cook can make to whip up heart-friendly recipes without sacrificing flavor.

If the recipe calls for:	Replace with:
Heavy cream	Evaporated skim milk or equal parts low-fat yogurt and low-fat, unsalted cottage cheese.
Sour cream	Fat-free, plain Greek yogurt with a squeeze of lemon juice stirred in.
Cream cheese	Half skim ricotta cheese and half fat-free cream cheese, pureed together.
Mayonnaise, whole milk or regular cheese	Low-fat or nonfat versions. For milk in recipes, try almond, rice or soy milks.
Butter (for baking)	Half no-sugar-added applesauce and half canola oil.
1 whole egg	2 egg whites or ¼ cup egg substitute.
Regular ground beef	Ground turkey or extra-lean ground beef.



Check out more healthy recipes online at www.columbiamemorial.org/recipes.

#### URGENT CARE

## Help when you need it

#### **SOMETIMES** it's obvious

when a trip to the emergency room is needed. Problems such as chest pain or heavy bleeding are clearly serious situations that need help and need it fast.

But many times the situation is less clear. That accidental cut might seem

deep—but not life-threatening. Your baby's fever is high enough to concern you, but your pediatrician's office is closed.

You'd like to consult a medical professional, but is the emergency room your only option?

In many cases, no. Another type of care—urgent care—is available to treat minor illnesses or injuries, including flu, fever, earaches, rashes, small cuts that need stitches and uncomplicated fractures. Some urgent care centers



also offer physical exams, vision and hearing

screenings, lab tests, and x-rays, notes the American College of Emergency Physicians.

#### Standing by

small cuts that need stitches.

The Warrenton CMH Urgent Care is open seven days a week, and the Astoria CMH Urgent Care is open Monday through Saturday, with extended hours. What's more, you don't need an appointment to go to CMH Urgent Care. That makes it ideal for situations when you can't get a timely appointment with your

regular doctor.

Another benefit of choosing CMH Urgent Care is quick service. When you go to an emergency room with a minor problem, you will need to wait to be seen until people with more serious problems are cared for first. That can take considerable time. At CMH Urgent Care, your wait time will be considerably less.

#### When you need care

The next time you or a family member needs health care and you aren't able to see your regular doctor, consider whether CMH Urgent Care will serve your needs.

#### **CMH Urgent Care** vs. emergency care

When your doctor's office is closed, it may be hard to know if you should go to an emergency room or the CMH Urgent Care, with locations in Warrenton and Astoria. These lists (at right) can help you decide.

Know where to go when you need care quickly. See our

locations and learn more at www.CMH urgentcare.org.

#### **EMERGENCY ROOM**

Signs of an emergency include:

- ► Trouble breathing.
- Chest pain or pressure.
- Any sudden or severe pain.
- ► Fainting, sudden dizziness or weakness.
- Bleeding that can't be controlled.
- Severe vomiting or diarrhea.
- Coughing up blood.
- Suicidal feelings.
- Problems speaking.
- Spinal cord or back injury.
- ▶ Seizures.

#### **URGENT CARE CENTER**

You might visit an urgent care center for:

- ▶ Minor cuts that need stitches.
- ▶ Sprains and strains.
- ▶ Minor bone fractures.
- Insect stings or animal bites.
- ▶ Minor burns.
- ▶ Fever.
- ▶ Flu.
- ► Coughs, colds and sore throats.
- ▶ Ear infections.
- ▶ Rashes.
- ► Allergies.

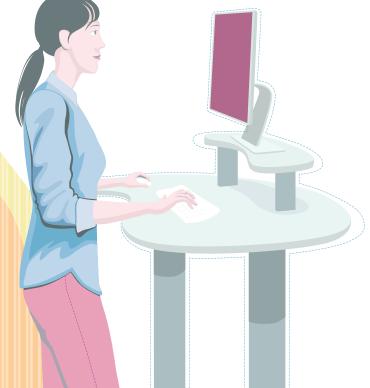
# Take a stand

Here are seven strategies to help you stop sitting and start moving again

FROM channel surfing at home to being glued to our office chairs at work, researchers estimate that we now spend more than half our waking hours sitting or participating in other sedentary behaviors.

Unfortunately, all that downtime may be contributing to obesity and even shortened life spans. What's more, prolonged sitting for much of the day might be a health risk even if you're regularly exercising, research suggests.

All of this hints at a need to work in some upright



activity. Here are seven ways to stop sitting and start moving again:

**1** Go screen-free. Consider restricting how much time you spend using your TV, laptop or smartphone. You might engage your feet more if you unplug or go offline.

2 Set a step-to-it timer. When you must sit for long stretches, set a reminder to get up and move about every hour. Use an alarm feature on your computer, phone or kitchen timer.

**3** Hoof it for your health. Try to think of everyday opportunities to walk instead of drive. Maybe that's a trip to the store, the office or the mailbox up the road. You'll save gas money—cha-ching!—and help your health.

4 Take a commercial (workout) break. When you

tune in to must-see TV (as opposed to endless channel surfing), get up and move during commercials. Try sit-ups, push-ups, pacing the floor or jogging in place.

We now spend more than half our waking hours sitting or participating in other sedentary behaviors.

**5 Stop sitting on the job.** You might ask your employer to consider installing standing workstations.

**6 Break the habit.** Do you normally take work breaks at your desk? Swap them for short walks whenever possible.

**Pick up the pace.** Wear a pedometer, and aim for 10,000 or more steps a day.

Sources: American Council on Exercise; American Society for Nutrition; National Institu<mark>tes</mark> of Health

#### Make a move

Just one more reason to get active: Regular exercise can help improve your cholesterol levels.

It may help:

- ▶ Lower bad (LDL) cholesterol.
- ► Raise good (HDL) cholesterol.
- ► Improve triglyceride levels.

Aim for about 30 minutes of activity most days of the week—and feel free to break that up into 10- or 15-minute increments, if needed. Try walking, swimming, cycling or playing tennis. Even tasks like housework and gardening can count as exercise if you do them every day.

Source: National Heart, Lung, and Blood Institute

## Shoo the 'Achoo!'

What season gets you sneezin'?

IF you're allergic to tree pollens, you probably start sneezing and sniffling in early spring. If grass pollens cause your allergies, then late spring and early summer might herald more miseries for you.



Beth Allison, **FNP-BC** Coast Allergy/ Asthma Center

And if weed

pollens are your nemesis, you might say "Achoo!" from late summer through early fall.

Seasonal allergies affect more

than 50 million Americans, according to the American College of Allergy, Asthma & Immunology. Airborne pollens and spores are the usual culprits.

Looking for relief from allergies? Family nurse practitioner Beth Allison, at the Coast Allergy/Asthma Center located within CMH, can help you find it. For an appointment, call **503-325-7546**.

Besides sneezing, symptoms can include itchy eyes, a scratchy throat and nasal congestion. Your eyes might also become watery and red.

There is no cure for seasonal allergies. But you don't have to wait for cold weather to bring relief. You can minimize your exposure to the offending pollens. For instance, try to:

- ▶ Stay indoors in the morning, when pollen levels are highest.
- ▶ Wear a pollen-filtering mask when outdoors.
  - ► Keep windows closed as much as possible.

Also, talk to your doctor. He or she can recommend medications to treat your symptoms. You might even

benefit from immunotherapy allergy shots that can help lessen your allergies.

To monitor pollen counts, visit the National Allergy Bureau at www.aaaai .org/nab.

Additional source: American Academy of Allergy, Asthma & Immunology

#### I have asthma, but I'm not having any symptoms. Why do I need to still take my asthma medicine?

A. When your asthma is under control, taking medicine may be the last thing on your mind.

But asthma is a disease that doesn't go away. That means it needs long-term treatment to help keep it under control. Your doctor may ask you to take maintenance medications that help keep your lungs from getting inflamed and keep symptoms at bay.

When you continue using them over time, those medicines may even help improve your lung function.

The bottom line: Your asthma needs to be managed—even when you don't have symptoms. If you stop, you run the risk of flare-ups that can make you feel bad or even put you in the hospital.

#### What's it like to have asthma?

If you don't have asthma, it's hard to know what kids who have the disease go through. Try this:

Put a straw in your mouth and suck air in. Now blow it out through the straw. That's what breathing is like for someone with asthma. It's tough!

If you have friends with asthma, don't let other kids tease them. And tell your friends it's OK for them to use their medicines or inhalers when they need to.

Don't worry, though. You can't catch asthma from someone else.



# All-star caregivers

We'd like to introduce you to two of the dedicated caregivers at CMH. These are people for whom service to others is more than just their job—it's a way of life. In their work and play, these caregivers make our region a better place to live.



as a firefighter/EMT and mustang gentler, and training her dog for competition.

In 2014, Alex stepped up from assistant chef to the role of CMH's chef supervisor. She leads the CMH Nutrition Services team in planning and preparing healthy, soul-satisfying meals for patients and staff.

"I think food is a huge part of healing," Alex says. "It can encourage energy and positivity."

She and the rest of the kitchen staff do their best to accommodate requests from patients. Bringing the nutritional and nurturing benefits of

firefighter for the Puget Island (Washington) Fire Department. She has been with the department for 10 years and was the first female lieutenant in Wahkiakum County.

She also practices natural horsemanship, gentling mustangs for the Bureau of Land Management auctions. Her hobbies include training her McNab Shepherd for Doggie Olympics and playing bluegrass music with her husband.

For Alex, being a caregiver in the **CMH Nutrition Services Department** is an ideal marriage of her interests in food and patient care. "I look

forward to preparing foods that are a success and a healthier option," she says.

Since becoming chef supervisor, Alex has focused on helping the members of her team build on their individual skills, drawing on her firefighter experience. "We find that each firefighter has something that they're good at and rely on them to do their job," she says. "The kitchen is the same way."

This approach has led to positive feedback from many happy patients.



IN the three years that Ken Pearson has worked in the CMH kitchen, he has consistently gone above and beyond his job description to give patients and staff the best dining experience he can.

"It sounds funny, trying to talk about it, because it's so minute, but I try to put my little touch on it," Ken says. "It's the little stuff."

Ken retired from the U.S. Coast Guard in 2000 after 20 years of service. He served on the Coast Guard cutters Morgenthau and Yocona and ran search and rescue out of Coos Bay and Westport. He was also an instructor at the National Motor Lifeboat School in Ilwaco, Washington, an engineering petty officer in Garibaldi and a housing

officer in Astoria. Never one to sit still, Ken began refereeing basketball games for the Tillamook YMCA in 1998. In 2000 he joined the North Coast Basketball Association. Over the years he's added baseball, girls fast-pitch softball, volleyball, Babe Ruth baseball, Junior State baseball and adult city league softball to his list of sports.

Ken also has a small lawn care business in Knappa through which he mows lawns primarily for elderly people. This time of year, "it's either lawn mowing, work or baseball," he says. "When it gets dark out, that's my time to relax."

At CMH, Ken serves on the Employee Recognition committee, which plans annual staff events

like the picnic and the Christmas party. Ken is often the first to arrive and the last person to leave the party—directing set-up and helping with teardown. His goal is to make sure that his fellow caregivers enjoy themselves at these parties.

He brings this attention to detail and focus on others to his job as a food service worker as well. "You work in a hospital setting because you care for people," Ken says. He shows this in his dedication to keeping patients and staff supplied with snacks, the care he shows in delivering food and setting up buffets.

"Everyone's been in the hospital at some time or another," Ken says. Food is "part of the healing process—it's a small part, but I like doing it."

#### CERVICAL CANCER

# All about Pap tests

**THERE** is an excellent reason why women should have Pap tests: They save lives.

If you want proof, imagine a graph that tracks deaths from cervical cancer over the past 50 years in the U.S. The line on the graph goes down, down, down. Cervical cancer was once a leading cause of cancer death in women, but deaths dropped by almost 70 percent from 1955 to 1992, reports the American Cancer Society.

Why? Because women started having Pap tests during that time.

The test picks up cancer early,

when the chance of a cure is very high. Pap tests also can spot cells that can become

cancerous over time. Treatment can completely stop the cancer from forming.

#### What are Pap tests?

Pap tests, which also are called Pap smears, are relatively simple tests. A doctor or other trained health care provider uses a tool called a speculum to open the vagina. He or she uses a small brush or scraper to collect a small sample of cells from the cervix—the lower part of the uterus.

The cells are put on a slide or in liquid and are sent to a lab to be examined. Results come back within a few weeks.

During the test, some women do feel brief discomfort. But for most, the test is painless. It's usually done as part of a pelvic exam.



#### Who needs a Pap test?

Pap tests should be part

of your preventive health

care routine.

According to the American College of Obstetricians and Gynecologists, Pap tests should be

> part of your preventive health care routine. Your age and health history guide how

often you need a Pap test. Most women can follow these guidelines from the college:

- ► If you are 21 to 29, have a Pap test every three years.
- ▶ After age 30, the Pap test should be

combined with the test that looks for the human papilloma virus. Women should have the two tests every five years—or continue screening with just the Pap test every three years.

► If you're over 65 or have had a hysterectomy, ask your doctor if you still need Pap tests.

Women of any age with certain risk factors may need more frequent Pap tests, including those who:

- ► Have had cervical cancer.
- ▶ Are HIV-positive.
- ► Had a mother exposed to DES (diethylstilbestrol) while pregnant.

## Pap test vs. pelvic exam: What's the difference?

A Pap test and a pelvic exam are often done at the same time, but the two should not be confused.

During a pelvic exam, a doctor or other trained health care professional looks at and feels a woman's reproductive organs. This exam can help find diseases of these organs. But it won't find cervical cancer at an early stage. To do that, a Pap test is needed.

One more thing to remember: Women should not stop having pelvic exams and Pap tests just because they're no longer having children.

Source: American Cancer Society



Don't wait to get tested. To make an appointment with the CMH Women's Center, call **503-338-7595**.

### **Providing comfort** care at the end of life

**COMFORT** care is an essential part of medical care at the end of life. Comfort care is the mission of Lower Columbia Hospice. It is care that helps or soothes a person who is dying. The goal is to prevent or relieve suffering as much as possible while respecting the dying person's wishes.

There are many questions that arise as someone approaches the end of life. What will happen? How does one give comfort? What should be said? What should be done? At the same time, you're possibly unsure about what is needed, worried about doing the wrong thing, or afraid of being there—or not being there—at the moment of death. You might be giving day-to-day care to the dying person, chosen to make health care decisions, or a close family member or friend who wants to help. You would like to know how to make dying easier—how to help ensure a "good death," with treatment

consistent with the dying person's wishes.

A "good death" might mean something different to you than to someone else. It may mean wanting to know when death is near so one can have a few last words with the people they love and take care of personal matters. Some people want to be surrounded by family and friends; others want to be alone. Of course, often one doesn't get to choose, but having your end-of-life wishes followed, whatever they are, and being treated with respect while dying are common hopes.

#### Body, mind and spirit

Generally speaking, people who are dying need care in four areas: physical comfort, mental and emotional needs, spiritual issues, and practical tasks. Lower Columbia Hospice works with patients and their families to ensure that each of these areas is attended to. From nurses

to social workers, chaplains and personal care aides, our entire team is dedicated to helping our patients and their families achieve a "good death."

Hospice is an approach to care, and so it is not tied to a specific place. It can be offered in homes, nursing homes, assisted living facilities and foster homes. Hospice care brings together a team of people with special skills—among them nurses, doctors, social workers, spiritual advisors and trained volunteers. Everyone works together with the person who is dying, the caregiver, and/or the family to provide the medical, emotional and spiritual support needed. A member of the hospice team visits regularly and is always available by phone—24 hours a day, 7 days a week.

It is important to remember that stopping treatment specifically aimed at curing an illness does not mean discontinuing all treatment. A good example is an older person with cancer. If the doctor determines that the cancer is not responding to chemotherapy and the patient chooses to enter into hospice care, then the chemotherapy will stop, but other medical care may continue. For example, if the person has high







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Call 503-338-7564, email cheryl ham@columbiamemorial.org or visit www.columbiamemorial.org/takeaclass to learn more about the exciting opportunities at CMH.

#### CHILDBIRTH/FAMILY **PREPARATION**

CMH offers a full line of labor preparation courses-weekdays over six weeks and a weekend fast-track class. The weekend class is the last session until July.

#### Six-Week Courses

▶ Wednesdays, May 13 to June 17; June 24 to July 29, 6:30 to 8:30 p.m. Free if delivering at CMH; \$75 if delivering elsewhere

#### Weekend Fast-Track Course

Friday, April 17, 6 to 8:30 p.m., and Saturday April 18, 10 a.m. to 4:30 p.m.

#### **CMH HEALTH AND WELLNESS**

#### **Diabetes Self-Management Program**

▶ Mondays, May 4 to June 8, 1 to 3:30 p.m. First Baptist Church Warrenton Free

This is a six-week workshop for people with diabetes. Skills needed in the daily management of diabetes and to maintain and/or increase activities are taught. Topics include techniques to deal with the symptoms of diabetes, fatigue and stress; healthy eating; appropriate use of medications; working more effectively with health care providers; and more!

#### Get a Grasp on Medicare

► Thursday, May 14, 3:30 to 5:30 p.m. **CMH Columbia Center** 

This course will discuss Medicare benefits and additional coverage options such as Medigaps, Prescription Drug Plans and Advantage Plans. Also, how to avoid health care fraud and where to get unbiased Medicare information and assistance. In addition, a guest speaker will discuss eligibility for Medicaid Long Term Care, SNAP and Medicare Saving Programs.



#### A Matter of Balance

► Tuesdays, April 14 to June 2, 10 a.m. to noon **CMH Columbia Center** \$50 or free to anyone age 60 and over

During this eight-week course, participants learn more about fall prevention strategies and make or maintain changes in their daily lives to help reduce the fear of falling. Exercises begin in session 3.

#### **Strong Women Strong Bones**

▶ Mondays and Wednesdays, April 13 to June 17, 5:30 to 6:30 p.m. (10 weeks) **CMH Columbia Center** \$50 for 10-week program

This program is a national evidence-based community exercise and nutrition program tailored for women at midlife and older. The program assists women in maintaining muscle mass, strength and function. It is easy and fun! Class size is limited, so register now!



#### DIABETES EDUCATION

CMH offers a Certified Diabetes Education Program for your individual needs. Group classes and individual appointments are available with our trained diabetes nurses and clinical dietitians. Support groups and foot clinics are available. Call 503-338-4012 for information.

#### **SUPPORT GROUPS**

#### **Bereavement and Grief Support**

First Thursday of the month, 2 to 4 p.m. **Bob Chisholm Community Center.** Room 1, 1225 Ave. A. Seaside ▶ Third Tuesday of the month, 4:30 to

CMH Health & Wellness PAVILION, Third-Floor Conference Room, 2265 Exchange St., Astoria Please contact Lower Columbia Hospice at **503-338-6230** with any questions.

#### Cancer Support Group

▶ Second Wednesday of the month, 2 to

NorthWest Senior & Disability Services, 2002 SE Chokeberry Ave., Warrenton Contact Brigid Koeppen at 503-338-4085.

#### **Ostomy Support Group**

▶ First Friday of the month, noon CMH Health & Wellness PAVILION. Third-Floor Conference Room, 2265 Exchange St., Astoria

Contact Lisa Harris, RN, at 503-338-4523.

Check out our new calendar online at www.columbiamemorial.org/takeaclass.

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# Health e-News

#### **SIGN UP TODAY!**

Are you a new parent? Have a baby on the way? Do you want the latest health news? We've got an e-newsletter for you! Visit www.columbiamemorial.org/enewsletter to subscribe.

# PLANETREE



### Culture of excellence

WHEN Columbia Memorial Hospital (CMH) started on the journey to become a Planetree-designated hospital more than 10 years ago, it was the beginning of a major paradigm shift for staff and patients.

The Planetree organization is an association of health care facilities that are dedicated to providing patient-centered care. As a member

of Planetree, CMH remains your independent community hospital. But now CMH's staff also has a worldwide community of likeminded professionals to share ideas with and to learn from.

Through our efforts at recreating it as a model of patient-centered care, CMH earned the honor of becoming a Planetree-designated hospital in the summer of 2013. It

was awarded this seal of approval based in large part on patient responses to the national Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) survey.

Many things that make CMH worthy of Planetree designation are just good hospitality—such as physically and emotionally nourishing food; the comfort of family, friends and pets; and beautiful, healing spaces. Other aspects of providing patient-centered care have required fundamental shifts in the way our staff interacts with and responds to our patients.

Patient-centered care is a process, not a destination, at CMH. Our Board of Trustees, administration and staff regularly check in with patients and review HCAHPS and patient satisfaction surveys to identify ways in which CMH can continue to improve.

CMH is dedicated to creating a culture of excellence among our staff so that we exceed your expectation of what a visit to the clinic, hospital or emergency room should be like.