

# Healthbeat

SRHC • Spring 2022

## Growing her dreams

Knee pain relief helps gardener pursue passions

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## 'My heart is healing'

An AFib patient is enjoying life without blood thinners

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## Parenthood with PCOS

The Nelsons are grateful for their children and the care from Salina Women's Clinic

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Salina Regional  
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# TIA: Take this warning seriously

Sometimes the signs and symptoms of a stroke go away almost as swiftly as they arrive. But that doesn't mean the danger has passed. Brief stroke symptoms can be caused by a TIA—short for transient ischemic attack.

Like a regular stroke, a TIA happens when the brain's blood supply is blocked by a clot. A TIA usually lasts only for a few minutes—the blockage dissolves on its own. As a result, a TIA doesn't cause permanent brain damage or disability.

However, a TIA is a warning. It means you're at risk for a full-blown stroke. The good news? After a TIA, treatment can help prevent future strokes. So if you think you may have had a TIA in the past, tell your doctor.

And remember this, should you ever experience the signs and symptoms of a stroke: Don't wait for them to pass. Call 911 right away. There's no way to know whether you're having a TIA or a stroke—and the latter could kill or paralyze you if you don't get immediate help.

The signs and symptoms of both stroke and TIA come on suddenly and include:

- + Trouble talking or understanding others.
- + A severe, unexplained headache.
- + Trouble seeing in one or both eyes.
- + Numbness or weakness on one side of the body.
- + Dizziness.

Sources: American Stroke Association; National Institute of Neurological Disorders and Stroke



## MAKEUP BRUSHES

### *Why and how to clean them*

If you can't remember the last time you cleaned your makeup brushes, it's time to clean up your act. Makeup brushes are breeding grounds for bacteria that can cause acne breakouts, rashes and even serious infections.

That's why it's prudent to wash your brushes every 7 to 10 days. Here's how:

- 1 Rinse the tips under lukewarm, running water.
- 2 Swirl each brush in a bowl of lukewarm water and a tablespoon of gentle shampoo. For good lather, you can massage each brush tip.
- 3 Rinse the tips under running water until it runs clear.
- 4 Squeeze out the water with a paper towel.
- 5 Let your brushes dry on a towel with the tips hanging off a counter edge.

Source: American Academy of Dermatology

# TECH NECK = #OUCH

Hunching over devices for hours can put a painful strain on your neck and back.

Here's a look at how a forward head position increases the force on the neck.



Position	Neutral	30 degrees	60 degrees
Force on neck	10 to 12 lbs.	40 lbs.	60 lbs.

**Whoa!** In an upright neutral position, an adult head weighs 10 to 12 pounds. As the head tilts forward, greater force is put on the neck. At a 30-degree angle, it's about 40 pounds. At 60 degrees, it increases to 60 pounds.

## HEADS UP!

These tips can help prevent tech-neck pain:

- + Fix your posture. Aim to keep your neck in an upright position.
- + Take breaks. Get up and stretch frequently.
- + Set limits. Reduce the excess time you spend on smartphones, tablets or laptops.

Sources: North American Spine Society; Surgical Technology International, Vol. 25

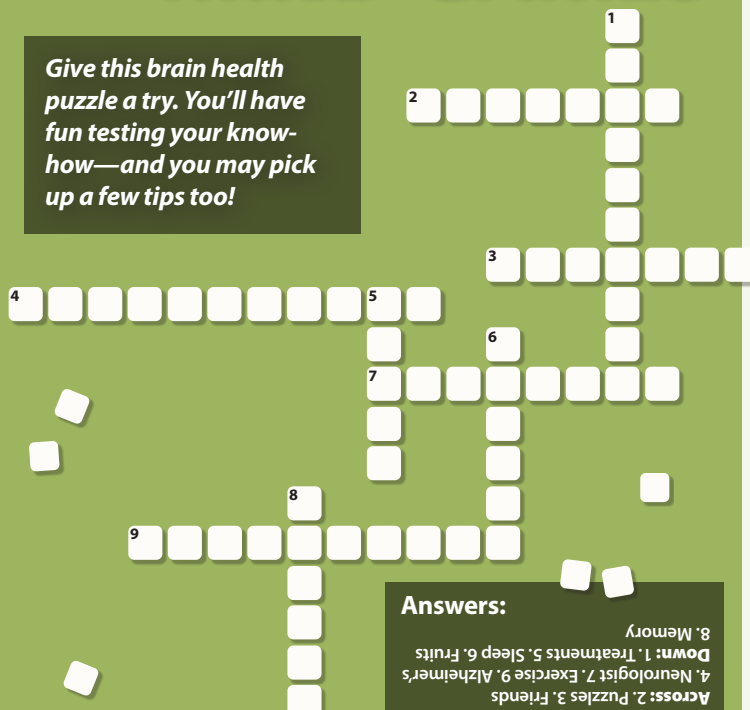


**Are you hurting now?** If you're living with neck or back pain, ask your doctor for a referral to Salina Regional Health Center's Outpatient Physical Therapy Clinic, or call **785-452-6668** for more information.



## MIND GAMES

Give this brain health puzzle a try. You'll have fun testing your know-how—and you may pick up a few tips too!



### Answers:

Across: 2. Puzzles 3. Friends  
Down: 1. Treatments 5. Sleep 6. Fruits  
4. Neurologist 7. Exercise 9. Alzheimer's  
8. Memory

### ACROSS

2. Exercise isn't just for your body. To help keep your brain active, read, play games, do \_\_\_\_\_ (like crosswords!) and try new hobbies.
3. Staying social can help keep your brain sharp. Make time for \_\_\_\_\_ and family—it's good for you!
4. A \_\_\_\_\_ is a type of doctor who specializes in treating the brain and spine.
7. Move your body to protect your brain. Regular \_\_\_\_\_ has been shown to increase brain function and improve mental health.

9. Though it's the most common, \_\_\_\_\_ disease isn't the only type of dementia.

### DOWN

1. Different types of dementia call for different \_\_\_\_\_, so it's important to get an accurate diagnosis.
5. Getting enough \_\_\_\_\_ every night can help keep your brain healthy.
6. Eat a diet with plenty of \_\_\_\_\_ and veggies, whole grains, fish, and nuts.
8. Loss of \_\_\_\_\_ doesn't always signal dementia. It can have other causes too.





# Jumpin' jambalaya

Makes 9 servings.

## Ingredients

- 1 pound boneless, skinless chicken breasts
- 14 ounces low-fat turkey kielbasa
- Nonstick cooking spray
- 1 medium celery stalk, chopped
- 2 small onions, chopped
- 4 cloves garlic, chopped
- 1 small bunch green onions, chopped
- 1 medium bell pepper, chopped
- 1 14½-ounce can of diced tomatoes, no salt added
- 1½ cups uncooked brown rice
- 4 cups water
- 2 cubes of low-sodium chicken bouillon
- 1 bay leaf
- 1½ teaspoons cayenne pepper
- 3 tablespoons parsley, finely chopped

## Nutrition information

Serving size: 1 cup. Amount per serving: 250 calories, 4g total fat (1g saturated fat), 53mg cholesterol, 31g carbohydrates, 22g protein, 5g dietary fiber, 531mg sodium.

Source: National Heart, Lung, and Blood Institute

## Directions

- + Wash chicken and pat dry. Cut the chicken breasts and kielbasa into 1-inch chunks.
- + Spray a medium-sized pan with nonstick cooking spray. Brown the kielbasa and chicken over medium heat and remove from the pan.
- + Add the celery, onions, garlic, green onions, bell pepper and diced tomatoes to the same pot and cook over medium heat for 10 minutes.
- + Put the cooked meat back into the pot. Add the rice, water, chicken bouillon cubes, bay leaf and cayenne pepper. Bring to a boil.
- + Cover, reduce heat, and let simmer for about 50 minutes\* or until the water is evaporated and chicken is cooked (to a minimum internal temperature of 165 degrees).
- + Stir in parsley and serve warm.

\*Instant rice will take less time.



# NIP KNEE PAIN in the bud

*A new treatment uses cooled radiofrequency ablation to bring profound relief*

*By John Berggren*

Salinan Jane Hart has known for decades that knee replacements would someday be in her future. Her passion for gardening and working around her home once kept her on her feet for hours on end. In recent years, however, she's had to limit her activities and cope with her aches and pains using over-the-counter medicines and occasional steroid injections to get through the days she is busiest, like around the holidays.

After being treated for a heart arrhythmia last year, Hart decided to retire a little earlier than planned from her job as a medical registrar. She wanted to focus on her health and get on a path that would allow her to pursue some passions in her life and check a few items off her bucket list.

Now aged 66, Hart admits that her once well-tended garden has “gone backwards” in recent years, so she looks forward to reviving it. And as an avid horticulturalist and a former instructor of the art, she's always longed to visit the Cotswolds region of England—a place renowned for its history and garden tours. British gardening, characterized by a blend of natural landscaping and pathways combined with formal features, has always been Hart's preferred style, and gardens in the Cotswolds are the pinnacle displays of this form.

## No walk in the park

For most people, getting a knee replaced



isn't just something you make an appointment for. In most cases, doctors recommend patients take some time to strengthen their body and address their overall health as much as possible to

✿ *Jane Hart visits a local garden center.*



prepare for the trauma of surgery and achieve the best outcome.

As Hart embarked on her journey to lose weight and strengthen her legs to prepare for knee replacement, Matthew Pyle, DO, a sports medicine physician at Salina Regional Orthopedic and Sports Medicine, recommended a new treatment that is available for osteoarthritic and frontal knee pain that could help propel her on her way to improved health.

### A matter of minutes

COOLIEF radiofrequency ablation uses water-cooled catheters and ultrasound guidance to target the sensory nerves in the knee and deactivate their ability to cause pain. The treatment leaves the knee's motor nerves intact to preserve function. Similar technology has long been used to treat back pain, but COOLIEF is the first treatment cleared by the FDA for knee and joint pain.

Patients first receive a test injection using an anesthetic in the office to see if COOLIEF can successfully bring relief to the nerves causing pain. If successful, an outpatient procedure using COOLIEF is scheduled.

Patients are given a mild sedative to help them relax for the procedure, and a local anesthetic is provided to numb the knee. Then Dr. Pyle places the COOLIEF catheters at three locations around the knee, using ultrasound guidance to visualize the nerves causing pain. Once in position, the machine delivers radiofrequency to deactivate these nerves.

### Long-lasting relief

The entire procedure takes a matter of minutes, and many patients claim to feel relief within hours. Dr. Pyle says the full effect isn't often realized until four to five weeks following the procedure, but most patients see a significant decrease in pain within two weeks.

The procedure works differently than a steroid injection, which is used to decrease inflammation within the joint.

By only targeting the nerves, COOLIEF commonly provides pain relief that lasts from a year to 18 months.

"COOLIEF is another tool we can use as a stopgap before surgical repair. It also provides an alternative to opioid use for pain treatment, which can have significant consequences," Dr. Pyle says. "And for those with mechanically sound knees that don't need surgery, or those who aren't candidates for knee replacement, COOLIEF can provide meaningful pain relief that improves their lives."

### One knee at a time

Hart says she could tell a difference in her right knee immediately after the COOLIEF procedure. At her two-week follow-up appointment, she was so happy she scheduled a COOLIEF appointment for her left knee. That treatment also was a major success.

"Now I can get a good night's sleep, and when I'm sitting I have no pain," Hart says. "I'm getting around better and better all the time. When your knees are bone on bone like mine are, you're still going to feel a dull ache when you're on your feet, but it's totally manageable."

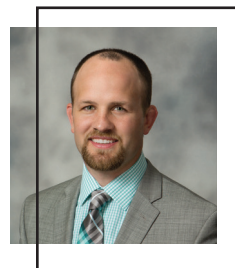
As her activity level increased following COOLIEF, Hart began physical therapy to learn exercises she could do at home to strengthen her legs to prepare for surgery.

It will take time and dedication to continue on her path to surgery and, ultimately, recovery. But as for Hart, she can sense that a new spring is near.

✿ *At Salina Regional's Outpatient Physical Therapy Clinic, Lane Martin, PT, teaches Jane Hart a leg-strengthening exercise to help prepare Hart for knee replacement surgery.*



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See if  
COOLIEF is  
right for you

Call Salina Regional Orthopedic and Sports Medicine Clinic at **785-452-7366** for a consult with Matthew Pyle, DO.



# 'MY HEART IS HEALING'

*An AFib patient is enjoying life without blood thinners*

*By Beth Vinson*

A good day for Dan Kohman, from Abilene, is a day spent at the lake fishing. But for several years, just going fishing could prove dangerous for Dan, since he was on blood thinners.

"He suffered many fishhook cuts, which caused lots of excessive bleeding," says his wife, Dorothy.

Dan had been put on blood thinners in 2009 after he had open-heart surgery in Wichita to repair a ruptured mitral valve. He, like many others who are on prescription blood thinners, was at risk for adverse outcomes, such as internal bleeding or improper therapeutic (maintenance) levels of clotting in his system, which does not offer as much protection from stroke. And of course, the cost of blood thinners was also a major concern.

After his cardiologist in Wichita retired, Dan decided he wanted to start seeing a cardiologist closer to home. Upon recommendation, he began seeing David Battin, MD, in Salina and was pleased that he no longer had to travel to Wichita for his checkups.

During one of his checkups with Dr. Battin in April 2021, Dan learned that his atrial fibrillation (AFib) was back, and

he underwent an ablation to restore a normal heartbeat. That was when Dr. Battin explained that he would be a good candidate for the Watchman, a procedure that reduces the need for anticoagulation medication. Dan had seen some advertisements about the Watchman and was all for it, especially if it meant not having to be on blood thinners anymore.

## **A great alternative**

Most people who have been diagnosed with AFib are prescribed anticoagulation medication to reduce their risk for stroke. People with AFib are known to have a five times greater risk for stroke than those with normal heart rhythms.

The risk arises from the heart's irregular beat, which can allow blood to pool and form clots in the heart. These clots can then enter the bloodstream and travel to the brain, causing a stroke. Prescription blood thinners have been the traditional approach to keeping these clots from forming.

But with the Watchman option, cardiologists implant a device using a heart catheterization procedure through the femoral artery, similar to the way stents and balloons are used to open

blocked arteries. Once implanted, the Watchman device covers the left atrial appendage. Within about six weeks, the body forms a tissue lining over the device to permanently close the appendage.

"The Watchman is a great mechanical alternative to long-term anticoagulation medication for AFib," Dr. Battin says. "This procedure is safe and effective in the vast majority of individuals. It favors those who choose the Watchman over the blood thinners, with the benefits of a reduction in bleeding."

## **Happy wife, happy life**

"I couldn't be more pleased with Dr. Battin and how this all came together," Dan says. "My heart is healing, I don't need to worry anymore, and I can live my life without blood thinners."

His wife is equally pleased with the results. "I too can stop worrying as much," Dorothy says. "He has an ornery streak a mile wide, so I never knew if he was going to hurt himself."

She adds with a laugh: "Whether that was from fishing or hunting or competing in a friendly pushup competition at work only five months after open-heart surgery, I just never knew what he was going to do next."



Dan Kohman enjoys a good day of fishing on the lake.



Dan and Dorothy Kohman are pleased that Dan no longer requires blood thinners after having the Watchman procedure done.

## THE WATCHMAN OPTION



### Know your heart

For a full list of services offered at Salina Regional Health Center, visit [srhc.com](http://srhc.com).

Nonvalvular atrial fibrillation (AFib) is a common heart rhythm disorder that makes patients five times more likely to have a stroke. To reduce this risk, patients are typically prescribed a blood thinner, but this can cause internal bleeding and other long-term side effects.

Thanks to an innovative procedure performed at Salina Regional Health Center, more patients are now enjoying life free of blood thinners. The Watchman is a minimally invasive heart catheterization procedure that has proved to be as effective as blood thinners in preventing stroke for patients with AFib—without the harmful side effects.

Salina Regional Health Center was one of the first hospitals in the state to perform this procedure and continues to be a leader in the number of implant procedures performed.





# CYCLING THROUGH PCOS

*Couple enjoys parenthood, supported by OB-GYN Christopher Graber, MD*

*By Aaron Anders*

Natalie and Karl Nelson were high school sweethearts while growing up in Alabama. They continued to date throughout college, and they tied the knot over six years ago. The couple ran into some difficult times while in college as Natalie would randomly have severe pain in her pelvic area. The pain remained a mystery until a physician diagnosed her with polycystic ovarian syndrome (PCOS) when she was 22.

## What is PCOS?

PCOS is a serious hormonal, metabolic and reproductive disorder that affects about 15% of women and is the leading cause of female infertility, according to the National Polycystic Ovary Syndrome Association. Most women, like Natalie, find out they have PCOS in their 20s and 30s when they have lots of pain or have problems getting pregnant. PCOS symptoms can start at any age after puberty.

“PCOS is a complex disease caused by endocrine, or hormone, changes,” says Christopher Graber, MD, an obstetrician-gynecologist (OB-GYN) at Salina Women’s Clinic. “It certainly can run in families, so there’s a genetic part to the disease. Many patients who have PCOS don’t know it. Sometimes, I do refer patients to an endocrinologist for help with

management, though sometimes that depends on the patient’s symptoms and goals.”

Natalie’s mother, grandmother and two sisters also have PCOS. “My grandma had infertility issues and so did my mother,” Natalie says. “My mom had four kids, and I am the only one that she did not have to use fertility medication to get pregnant.”

Symptoms of PCOS include irregular periods, severe acne, weight gain, ovarian cysts, infertility, excess facial and body hair, male pattern hair loss, insulin resistance, anxiety, and depression.

“I was having issues as a teenager, but my mother and I were told by a doctor that ‘as you get older it will even itself out’ and that ‘you’re not old enough to have regular cycles,’” Natalie says. “At my college health center, they would give me a pregnancy test and say, ‘Sorry that it hurts.’”

## Feeling the pain

The hardest part for Natalie was having irregular cycles, heavy periods and painful cysts on her ovaries—sometimes they would get so painful that she would have to miss work or college classes. “I



▲ Natalie and Karl Nelson, of Salina, are thankful to have their three children—Calvin, Amelia and Martin—after Natalie was diagnosed with PCOS in 2015.

was shocked when a doctor told me, ‘You should be able to go to work and school when you are on your period. It shouldn’t knock you out for three days—that is

not normal,’” Natalie says.

Karl remembers feeling hopeless seeing Natalie in so much pain. “One time in college we were at Walmart, and she must have had a cyst burst because she just collapsed,” Karl says. “I had to carry her out of the store by having her stand on the end of the shopping cart. When it [PCOS] was unmanaged, it was uncontrollable.”



▲ Natalie Nelson holds her sleeping 1-month-old, Calvin, while Karl Nelson shows Amelia, 2, a book and Martin, 4, plays with a toy at the Nelson home in Salina.



▲ Christopher Graber, MD, holds baby Calvin during a checkup at the Salina Women’s Clinic.

## Hoping for the best

After being married for six months, Natalie’s right ovary had swelled to the size of a grapefruit with several cysts, and she had an oophorectomy to remove it. After the surgery, she was told it might be really difficult to have children or she might need some additional help from a doctor. She was also told her remaining ovary may work in overdrive and conceiving may not be a problem.

Natalie’s pain was gone after the surgery, but thoughts about not being able to conceive children weighed on her mind. After the Nelsons moved to Salina, Natalie started asking her friends who they’d recommend for an OB-GYN. After receiving several recommendations, they chose Dr. Graber with Salina Women’s Clinic.

## The gift of life

Dr. Graber advised the Nelsons on natural ways to increase their fertility. Four months after getting the advice, Natalie found out she was expecting. Dr. Graber has now delivered three healthy babies for the Nelsons.

“I appreciate Dr. Graber, as he did not rush me in and out or make me feel like my questions were dumb,” Natalie says. “It’s nice having a doctor that actually listens, especially after having some doctors in college who did not listen to me. The pregnancies were all good experiences; I feel like each birth got easier.”

The Nelsons are thankful to have healthy children and are grateful for the staff at the Salina Women’s Clinic. Now that Natalie knows what PCOS is and what the symptoms are, she will be looking for those symptoms when her daughter comes of age and will get her the proper care if needed.

## What are the symptoms of hormonal imbalance?

Women of every race and ethnicity can have PCOS. It may be time to set up an appointment with your provider if you’re experiencing several of the following symptoms associated with PCOS:

- + Drastic changes in weight.
- + Headaches.
- + Hot flashes.
- + Trouble sleeping.
- + Changes in skin appearance, like overly dry skin or rashes.
- + Constant irritability.
- + Chronic fatigue.
- + Lack of sex drive.
- + A lump on the neck.
- + Bloating or changes in appetite.
- + Excessive hair growth on the face, armpits or back; hair loss on the head.
- + Irregular periods (fewer than eight periods a year or none at all).
- + Acne.
- + Bowel issues.



# TAKE EXTRA CARE of your mental health

You're preoccupied and having difficulty focusing. Your sleep isn't great. And you aren't eating as well as you know you should.

You may be stressed out by COVID-19.

It's not unusual to be anxious during a disease outbreak, especially a pandemic like this one. But chronic stress isn't good for your body or mind. It might be time to take some steps to ease the pressure on yourself.

## Recognize the signs of stress

How do you know if your mental health is suffering during this outbreak? You may be feeling stressed if you're having:

- + Fearful thoughts about your health and the health of your family and friends.
- + Trouble sleeping.
- + Changes in your eating patterns.
- + Difficulty concentrating.
- + A worsening of chronic health problems.
- + A worsening of depression or other mental health conditions.

- + A rise in your use of alcohol, tobacco or other drugs.

## Take positive steps to feel better

Health experts offer the following tips for coping with these stressful times:

- + Wean yourself off constant news. This can be as easy as turning off the TV. You also may want to disable your phone's news alerts. (You can always turn them back on later.)
- + Check in with family and friends. Call them. Have a video chat. Meet with your book club over a group meeting app.
- + Get your facts straight. Learn more about the virus from reputable sources like public health agencies and your local health department. Knowledge can ease anxiety.

- + Celebrate small wins. Keep track of moments of gratitude and joy.
- + Keep to healthy daily routines as much as you can. Whatever you do for self-care, keep up with those habits. They can help you feel more in control.
- + Move more. Exercise is a great way to improve both mental and physical health.
- + Practice mindfulness. Be in the moment, rather than worrying about what comes next. Breathe deeply and accept the "now" without judgment.
- + Put free time to good use. Listen to an audiobook. Draw or paint. Make notes in a journal. Work in your garden.

Sources: Centers for Disease Control and Prevention; National Alliance on Mental Illness



**Need someone to talk to?** Veridian Behavioral Health offers mental health services, and many patients are able to connect via video chat. Call **785-452-4930** or visit **veridianbh.com** for more information.

# How to help prevent cervical cancer

A little knowledge can go a long way in the fight against cervical cancer. Each of these four facts can help protect you from a cancer that strikes approximately 12,000 women in the U.S. every year.

**1 Human papillomavirus is to blame for most cases of cervical cancer.** But a vaccine can help prevent this sexually transmitted infection. Experts recommend that most people get vaccinated at age 11 or 12. But if you're 45 or younger and never had the HPV vaccine—or didn't get all the necessary HPV shots—ask your doctor about getting vaccinated. It may still be beneficial.

**2 The HPV vaccine doesn't replace the need for screening tests.** These tests include the HPV test and the Pap test, which look for different things. The HPV test looks for HPV on a woman's cervix. The Pap test checks your cervix for abnormal changes that, if not found and treated, can develop into cervical cancer.

**3 The timetable for screening depends on your age and health history.** Talk with your doctor about what's best for you. Most women can safely follow these guidelines from the American Cancer Society: Screening for cervical cancer should start at age 25. Women ages 25 to 65 should have a primary HPV test every five years. If primary HPV testing is not available, screening is recommended with either a test that combines an HPV test with a Pap test every five years or a Pap test alone every three years. It's OK to stop testing if you're older than 65 and have had normal test results for many years. Also, ask your doctor about screening if you've had a hysterectomy. The reason for your hysterectomy will determine if you need a test.

**4 Take other steps to lower your risk.** Eat plenty of fruits and vegetables—women who don't may be at increased risk of cervical cancer. Limit your number of sexual partners. And don't light up: Women who smoke are twice as likely to get cervical cancer as those who don't.

Additional sources: Centers for Disease Control and Prevention; Office on Women's Health; U.S. Preventive Services Task Force



## When was your last HPV or Pap test?

Schedule a screening today. Visit [srhc.com](https://www.srhc.com) to view a comprehensive list of our affiliated providers and clinics to find one near you.



# Reducing readmissions

*Transitional Care and Chronic Care services help keep patients healthy*

When Nellie Korbel, 91, was discharged from the hospital after a weeklong stay for pneumonia, Salina Regional Health Center's care for her wasn't over. That's when Transitional Care Manager Barb Gack, ARNP, and Chronic Care Manager Tammie Lust, RN, sprang into action. Their goal: Keep Korbel on a path toward recovery and maintaining stable health.

Salina Regional Health Center began piloting Transitional Care and Chronic Care services in late 2019 and early 2020 in an effort to improve patient outcomes and decrease hospital readmissions. Today, all hospitalized patients are evaluated using specific analytics that create a predictive measure of a patient's likelihood to manage their care following discharge.

Currently, the services are offered to patients who live in or just outside of the city of Salina

and to those who have a primary care or specialty doctor who is part of the Salina Regional Medical Group family of clinics.

## Home visits

Salina Regional's Transitional Care service makes contact with patients while they're still in the hospital to offer a visit to their homes after they're discharged. The home visit consists of a physical assessment and review of discharge instructions and verification that all medicines and recommended therapies are available and understood. The importance of having advance directives is also reviewed, and resources are provided to help complete these measures.

Sometimes after the initial home visit, Chronic Care services also are offered. This involves a staff member checking in—by phone or in person—to ensure

patient symptoms are consistent with recovery and no other areas of concern arise. Both Transitional Care and Chronic Care providers give reports of their encounters to the patient's physician. Managers Gack and Lust also provide their direct phone numbers to patients so they can be reached at any time with questions.

Gack made a home visit to Korbel and met with her family to verify that home health services had been established and all her medicines and care were in order. Lust followed up soon after to make sure Korbel's recovery was still on track and determine if any additional services were needed. After reviewing information with the family, Lust was able to help start the process of applying for veterans benefits that were available to Korbel's husband, Lawrence, who served in the Army in the 1940s. These benefits could help provide additional home-based services to the couple in the future if needed.

## 'They just get things done'

Since these services were implemented, Salina Regional has seen a 32% decrease in the number of hospital readmissions within 30 days.

"Barb and Tammie are both amazing," says Korbel's daughter Lori Loe, who is heavily involved in looking after her parents. "They just get things done. They both have shown endless resources and connections to help our family, which allows Mom and Dad to stay at home."



Barb Gack, ARNP, Transitional Care Manager at Salina Regional (at left), and Tammie Lust, RN, Chronic Care Manager, visit with Nellie Korbel to go over using an inhaler to help improve her breathing during a home visit after her discharge from the hospital.



Katie  
McWilliams,  
DO

## Ellsworth now offers hospitalist services

Ellsworth County

Medical Center (ECMC) began offering hospitalist services last fall to increase efficiencies for inpatient care and better facilitate patient transfers both to and from the facility.

Katie McWilliams, DO, has been on staff at ECMC since 2014, caring for patients in the hospital and clinics. In her new role, Dr. McWilliams focuses on hospital-based medicine. She also provides weekday coverage for the emergency department and is leading quality care initiatives.

Hospitalists focus on handling inpatient needs as they arise and coordinating the care team to provide services. With COVID-19 impacting health care around the region, ECMC has seen larger numbers of inpatients—many of whom require more care than the hospital has traditionally been used to providing.

“Focusing on inpatient care has allowed more team-based care, with improved communication between patients, families, nursing, therapists, social work and anyone involved in the care of the patient,” Dr. McWilliams says. “I have always really enjoyed hospital medicine and find it challenging and rewarding.”

ECMC CEO Jim Kirkbride notes that inpatient satisfaction has increased since the hospital began offering hospitalist services.

# Project SEARCH coming to Concordia

*Internship for young adults with disabilities to launch this fall*

*By John Berggren*

Cloud County Health Center and the Learning Cooperative of North Central Kansas (LCNCK) have announced a partnership to start Project SEARCH in Concordia this fall, joining a growing nationwide effort that is changing the face of employment for young adults with developmental and intellectual disabilities.

Project SEARCH provides an internship program for individuals who are capable of competitive employment but may need additional training to gain the skills necessary to obtain and retain a job. A nearly identical program at Salina Regional Health Center, which has been in place for more than a decade, has trained more than 100 interns, of whom more than 70% have gone on to secure competitive employment.

## Starting small, thinking big

Initially, the Concordia program plans to limit class sizes to two to four interns to ease curriculum implementation and accommodate the hospital’s planned move into its new facility, scheduled to open late this year. Interns for the first class will be sourced from the LCNCK’s member school districts. It’s anticipated that class sizes could be expanded in future years to meet area needs and that intern opportunities could be opened up to neighboring cooperatives in the future.

“We’re so thrilled to have formed this partnership with Cloud County Health Center,” says Rebekah Helget, Special Education

Director at LCNCK. “They have taken great ownership from the beginning and want it to be as successful as we do.”

Cloud County Health Center sees Project SEARCH as an opportunity to address a number of needs in its service area.

“Students who participate in Project SEARCH have a good success rate in finding and keeping a job after graduation,” says David Garnas, CEO at Cloud County Health Center. “We believe this program will benefit the employers in our region and could alleviate some of our own facility workforce shortages in the future.”



Salina Project SEARCH intern Pahl Castner stocks surgical supplies in the central services department.



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## ENT and Audiology expertise for the entire family.



Salina Regional Health Center is proud to be your family's home for audiology and ear, nose and throat (ENT) services. Salina Regional ENT and Audiology (formerly Central Kansas ENT Associates) is led by the experienced team of Drs. Mark Bell and Jerrold Cossette, Melissa Crawford, PA-C, and audiologists Michael Weiser and Brennan Walter.

We offer comprehensive care for children and adults. Our services include nasal and sinus surgery, tonsillectomy, adenoidectomy and diagnosis and treatment of diseases of the ears, nose and throat including head and neck tumors and skin cancer. We also offer audiometric evaluations and hearing aid fitting and dispensing. Salina Regional ENT and Audiology is welcoming new patients at locations in Salina, plus outreach clinics in Belleville, Beloit and Russell. Contact us today.

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