

Trauma care, close to you

Whether it's a car accident or a fall from a ladder, emergencies happen when you least expect them. And when you or your loved one needs help, you need it fast.

Cass Regional Medical Center is now state-certified as a Level III Trauma Center, and we're here to help. We connect patients from Bates and Henry counties and portions of Cass, Benton, Johnson and Vernon counties to the trauma care network. The nearest trauma center to the south of Harrisonville is located in Bolivar.

"Cass Regional has demonstrated its ability to provide prompt assessment, resuscitation and stabilization of injured patients," says general surgeon Jack Hudkins, MD, FACS, trauma medical director. "Our team has worked hard to ensure the best initial trauma care possible in our immediate area."

Key elements of a Level III Trauma Center include 24-hour coverage by emergency medicine physicians and nurses, timely availability of general and orthopedic surgeons and anesthesia providers, and access to laboratory and diagnostic imaging services. That means when you or your loved one needs emergency care, Cass Regional is ready.

Trauma Program Coordinator Paula McBride, RN, has nearly 20 years of experience as an emergency nurse. McBride manages the ongoing quality assessment of trauma care at Cass Regional and coordinates continuing education for the trauma team, which includes doctors, nurses, laboratory and medical imaging technologists, respiratory therapists, and chaplains. "We study the treatment and outcomes for our trauma patients and continually evaluate the care we provide," she explains.



WE HAVE YOU COVERED.

Visit www.cassregional.org.



The trauma program at Cass Regional Medical Center is led by (from left) Emergency Department Nurse Manager Vi Warren, RN, BSN; Trauma Program Coordinator Paula McBride, RN; and Trauma Medical Director and general surgeon Jack Hudkins, MD, FACS.

wellness Calendar Fall 2014



SEARCHING FOR DR. RIGHT?
Try our physician directory at
www.cassregional.org.



Alzheimer's Support Group

Tuesdays, Dec. 9, Jan. 13, Feb. 10, March 10,
6:30 p.m.

Conference Room 1

Contact Jeanne Reeder at jeanne.reeder@alz.org or call **800-272-3900**.

COPD Support Group

Wednesdays, Dec. 10, Feb. 11, 11:30 a.m.

Conference Rooms 1, 2 and 3

Call Gary Skiles, RRT, at **816-380-5888, ext. 4160**, or email gskiles@cassregional.org.

Diabetes Support Group

Thursdays, Dec. 18, Jan. 15, March 19,
6:30 p.m.

Conference Rooms 2 and 3

The Dec. 18 meeting will be a special holiday celebration, entertainment and cooking contest! Call Liz Whelan, RN, MSN, CDE, at **816-380-5888, ext. 6010**, or email lwhelan@cassregional.org.

Community Blood Center Blood Drive

Monday, Dec. 22

Friday, Feb. 20

2 to 5 p.m.

Conference Rooms 1, 2 and 3

Appointments welcome but not necessary. Go to www.savealifenow.org.

Weight Loss and Bariatric Surgery Seminar

Tuesday, Jan. 13, 6 p.m.

Conference Rooms 2 and 3

Call Heather Danforth, MA, at **816-380-2446**, or email hdanforth@cassregional.org.

Rehabilitation Services Open House

Tuesday, Feb. 10, 4 to 6 p.m.

See additional information at right.

Prizes, free screenings at open house

Our cardiac rehabilitation program is turning 20! Let's celebrate!

Join the Cass Regional Medical Center Cardiac Rehabilitation staff as they and their colleagues from Pulmonary Rehabilitation, Physical and Occupational Therapy, Speech Therapy, Diabetes and Patient Education (including nutrition therapy), and the Sleep Lab host the annual rehabilitation services open house on **Tuesday, Feb. 10, from 4 to 6 p.m.**

Take advantage of free blood pressure, heart rate and blood oxygen screenings, and sign up for door prizes! For a nominal fee, you may also have your blood drawn for an A1C test. (The A1C measures an average blood sugar reading for the previous three months. You do not need to fast to have an A1C test.)

Clinical professionals from each area will have fun giveaways plus plenty of educational materials and will also be available to answer your questions.



JOIN US!

Call Terry Johns, RN, at **816-380-5888, ext. 3200**, or email tjohns@cassregional.org.

March is National Nutrition Month!



Are you getting all the good foods and limiting the bad ones? Good nutrition plays a key role in overall health and well-being. Our nutrition counseling service helps both in the treatment of chronic conditions—such as diabetes, COPD and slow-to-heal wounds—and the prevention of disease and disability.



EAT THE RIGHT STUFF.

For more information about nutrition services at Cass Regional Medical Center and special National Nutrition Month events, call Erin McNamara, RDN, at **816-380-5888, ext. 6070**, or email emcnamara@cassregional.org.

wellnessmatters

Information in WELLNESS MATTERS comes from a wide range of medical experts. If you have any concerns or questions about specific content that may affect your health, please contact your health care provider.

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Looking for a family health care provider?

Melinda Lacy, FNP-BC, joins Harrisonville Medical Clinic

Board-certified family nurse practitioner Melinda Lacy, FNP-BC, has joined the staff of Harrisonville Medical Clinic and is now accepting new patients.

Prior to joining Harrisonville Medical Clinic, Lacy was the Case Management nurse manager at Cass Regional Medical Center and was selected as one of the Kansas City area's 2014 Heroes in Healthcare by *Ingram's* magazine. Lacy's experience also includes neonatal, pediatric and adult intensive care, as well as emergency care and obstetrics. She holds a Bachelor of Science degree in nursing from the University of Kansas and received her master's degree in nursing from the University of Central Missouri. Lacy practices in collaboration with Samuel Brewster, MD.



MAKE THE CALL. For more information or to schedule an appointment, call **816-380-7470**.

What is a nurse practitioner?

For a blend of nursing and health care services, you may want to consider a nurse practitioner (NP) as your primary care provider.

An NP is a registered nurse with advanced education and hands-on experience with patients. He or she may be part of the health care team in a clinic, nursing home, hospital or private medical office. NPs are often found in family medicine, women's health and pediatric settings. Some work on their own, while others are supervised by a doctor.

Nurse practitioners provide a number of health care services, such as prescribing medications and diagnosing and treating illnesses and injuries.



Volunteer chaplains at Cass Regional are, from left, Bill Sumner, Carolyn Randol, Matt Peery, Samuel Aparicio and Fred Kidd. Not pictured: Rod Callen and David and Kathy Cundiff.

Volunteer chaplains: Vital members of our team

The volunteer chaplains at Cass Regional Medical Center enhance care by helping to address the spiritual and socioeconomic needs of patients to promote healing in body and spirit. Cass Regional's chaplain corps includes ordained ministers, retired ministers and lay ministers who have had formal training in counseling, pastoral care and/or crisis intervention.

The chaplains each volunteer a minimum of three days per month, during which they visit hospital patients to offer support and are on call for emergencies. The chaplains also play a key role on Cass Regional's palliative care team, which also includes doctors, nurses and social workers, who work together to relieve suffering and improve quality of life for patients with serious and life-limiting illnesses.



WANT TO JOIN US? If you are interested in learning more about becoming a volunteer chaplain at Cass Regional, please call Donna Walters at **816-887-0783** or email dwalters@cassregional.org.

When you lose lung

power

i
NEED A BREATH OF RELIEF?
Pulmonary rehabilitation can help. Call 816-887-0778 or email cgraves@cassregional.org.

It seems like a simple thing. Air goes in, air goes out. There's nothing hard about taking a breath.

Fortunately, for most people that's the reality of respiration. But people with chronic obstructive pulmonary disease, or COPD, know that easy breathing can be only wishful thinking. And if you're a smoker, here's something you should know: COPD could be in your future.

COPD is a lung disease that includes two main conditions: emphysema and chronic bronchitis. Most people with COPD have both illnesses (see "Components of COPD," at right) and are—or were at one time—smokers. But smoking is not COPD's only risk factor.

The American Lung Association reports that secondhand smoke, air pollution, heredity and a history of respiratory infections also increase your chances of getting the disease.

So does long-term exposure to certain chemical fumes, vapors and dusts.

What are the warning signs?

Usually, COPD comes on gradually, and early on, some symptoms may be easy to discount. But if you have symptoms, you should bring them to your doctor's attention—especially if you're a smoker. They include:

- ▶ Cough.
- ▶ Increased sputum.
- ▶ Shortness of breath, especially with exercise.
- ▶ Wheezing.
- ▶ Chest tightness.
- ▶ Frequent clearing of the throat.

Doctors look at your symptoms, your history and the results of your physical exam to make a diagnosis. Breathing tests are also important.

Spirometry is the most commonly used test to measure how well your lungs are working, the National Heart, Lung, and Blood Institute reports. In this test, you breathe forcefully into a hose that's connected to a machine. This machine measures

how much air your lungs can hold and how fast you can blow air from your lungs.

Other lung tests as well as blood tests and chest X-rays might also be performed.

After a diagnosis

There is no cure for COPD. But if you have it and you smoke, quitting is the most important thing you can do for your lungs. Avoiding secondhand smoke and other lung irritants, such as air pollution, is also important.

In addition, there are things that can help you feel better and can enable you to breathe more easily. For some people, pulmonary rehab may be recommended. This is a program in which various health care professionals help you learn to cope with your disease. It might include education, nutrition advice, exercise training and counseling.

Your doctor may also prescribe medications. Among them are:

- ▶ Bronchodilators to open air passages



WAITING TO EXHALE?

To find out how rehabilitation can help you, call Christine Graves, CRT, pulmonary rehabilitation coordinator, at 816-887-0778 (Tuesdays and Thursdays are best) or email cgraves@cassregional.org.

PULMONARY REHABILITATION

It's about quality of life

For many patients, pulmonary rehabilitation slows the progression of chronic lung disease, such as COPD, and helps maximize their lung function. Cass Regional Medical Center's pulmonary rehabilitation program includes supervised exercise training, respiratory care instruction, smoking cessation assistance, nutritional counseling and psychosocial support. Pulmonary rehab can help:

- ▶ Increase independence and improve self-confidence.
- ▶ Encourage self-management of disease and control over daily activities.
- ▶ Decrease feelings of anxiety and depression.
- ▶ Improve physical conditioning and exercise performance.
- ▶ Improve quality of life for participants and their families.

The Pulmonary Rehab Copay Assistance Program is available for patients who qualify and is made possible by donations to Cass Regional Medical Center Foundation.

in your lungs.

- ▶ Inhaled steroids to help reduce airway inflammation.
- ▶ Antibiotics to fight infections.

Getting flu and pneumonia vaccinations is important because they may lessen your chances of contracting these illnesses and the complications that may come with them.

Some people with advanced COPD require oxygen, and sometimes surgery is recommended.

Surgical options may include a lung transplant, bullectomy or lung volume reduction surgery (LVRS). Bullectomy involves removing bullae, or large air sacs that form in the lungs. LVRS involves removing sections of damaged tissue from the lungs. This may help healthier lung sections function better.

Components of COPD

Emphysema

Emphysema is a condition that involves damage to the alveoli—the air sacs in the lungs. The damage causes the air sacs to lose their shape and elasticity, which makes it difficult to breathe. The walls of the sacs may also be destroyed completely, leading to fewer and larger air sacs instead of a multitude of tiny ones. The result is a reduction in the efficiency of your lungs, because not as much oxygen is able to enter your bloodstream.



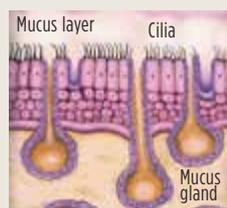
Healthy alveoli



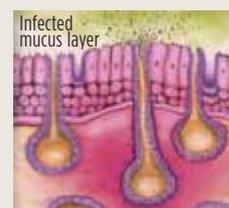
Damaged alveoli

Chronic bronchitis

With chronic bronchitis, the bronchial tubes become inflamed and an excessive amount of mucus is produced. This makes it hard for air to get in and out of the lungs. The cilia—the tiny hairs that move mucus up the throat—become damaged and lose their ability to propel mucus upward. This results in conditions that raise the risk of infection.



Normal airway



Inflamed airway

Source: National Heart, Lung, and Blood Institute



HIP HURT? NEED A KNEE?

As many as 4 out of 5 people who undergo replacement surgery are completely pain-free within a year. Call Dr. Petersen at 816-380-7662.

Say goodbye to hip and knee pain

Whether you're walking down the street or climbing up some stairs, moving your knee or hip shouldn't make you wince in pain. But that's exactly what can happen when arthritis wears away the shock-absorbing cartilage at the ends of bones in a hip or knee joint.

And it's no way to live.

If hip or knee pain has become a part of your life, here's welcome news. There are more ways to ease your pain than you might realize. Here are some of the most effective strategies:

Trim down. If you're overweight, those extra pounds place extra stress on weight-bearing joints, like the hip and knee. Losing weight reduces that stress and can curb pain.

Give your hip and knee some TLC. Rest your joints and do your best to avoid any activity that makes your pain worse. Applying heat or cold to your joint—for example, by using warm towels or cold packs—can also ease pain. Check with your doctor to see whether you should try heat, cold or both.

Make all the right moves. Appropriate exercise—specifically, physical activity that strengthens the muscles that support your hip or knee but doesn't stress them—can

help you move more comfortably and freely. For a customized exercise program that can help you improve range of motion and relieve pain, your doctor may refer you to a physical therapist.

Partner with your doctor for pain relief. Many different medicines ease arthritis pain, and your doctor can help find the right match for you. You might be able to control your pain with over-the-counter or prescription pain relievers. If not, your doctor may recommend a corticosteroid injection into your joint, which can reduce inflammation and pain.

Is it time for surgery?

If steps like these don't help—and your pain is severe—your doctor may advise surgery to replace your damaged knee or hip with an artificial one. As many as 4 out of 5 people who undergo replacement surgery are completely pain-free within a year, the American Association of Hip and Knee Surgeons reports. But even with an increasingly speedy recovery, it is still major surgery. So be sure to carefully explore its pros and cons with your doctor.

Additional sources: American Academy of Family Physicians; American Academy of Orthopaedic Surgeons; National Institutes of Health



Dr. Petersen is on the move

Cass Regional Medical Center is pleased to announce that orthopedic surgeon Kenneth W. Petersen, DO, has joined the hospital's new clinic, Cass Regional Orthopedics, located in Suite 120 of Rock Haven Medical Mall on the hospital campus.

Dr. Petersen has practiced at Cass Regional since March 2013 and most recently was part of the staff of Bone & Joint Specialists, P.C. He holds an Associate of Arts and Sciences degree from Ricks College in Rexburg, Idaho, and a Bachelor of Science in physical education (with an emphasis on exercise

physiology) from Brigham Young University in Provo, Utah. He received his Doctor of Osteopathic Medicine degree from Kansas City University of Medicine and Biosciences. Dr. Petersen completed a medical internship and orthopedic surgery residency at the Medical Center of Independence and another orthopedic surgery residency at St. Mary's Medical Center in Blue Springs, Missouri.



CONSIDERING SURGERY? For more information or an appointment with Dr. Petersen, call 816-380-7662.

Avoid another heart attack

Steps you can take now

Many things in life are worth doing more than once. But having a heart attack isn't one of them.

Unfortunately, once you've had a heart attack, you face an increased risk of having another one, according to the National Institutes of Health.

But with the help of your doctor, you can take steps to prevent another heart attack.

Lifestyle changes

Having a heart attack means you will need to make key changes, says the American Heart Association (AHA). Here are some:

- ▶ **Don't smoke.** If you smoke after a heart attack, your chances of having another one will double.
- ▶ **Stay active.** Regular physical activity can help you control your weight and lower your blood pressure and cholesterol. Walking, bicycling and swimming are all good forms of exercise that can help your heart.
- ▶ **Choose good nutrition.** Following a diet low in fats and high in fruits, vegetables and whole grains can also help you reduce heart attack risk.

Medications

You may need to take medications to control heart attack risk factors. They may include aspirin, drugs to help lower your cholesterol or blood pressure, and medicines to help reduce your heart's workload. It's important that you follow your doctor's directions on how and when to take your medications.



Cardiac rehab

One of the best things you can do after a heart attack is to get involved in a cardiac rehabilitation program, according to the AHA.

Rehabilitation programs are supervised by doctors, nurses, physical therapists, exercise specialists and other health care professionals who can help you make lifestyle changes and take part in safe physical activities.



HEALING HEARTS

Cass Regional offers the county's only cardiac rehabilitation program, which is certified by the American Association of Cardiovascular and Pulmonary Rehabilitation. Does your heart need help? Call Terry Johns, RN, at 816-380-5888, ext. 3200, or email tjohns@cassregional.org.



Heart attack warning signs

It's also important to be aware of the signs of a heart attack. Remember, they may not be the same as when you had your first heart attack.

They may include:

- ▶ Chest discomfort that lasts for more than a few minutes.
- ▶ Discomfort in other areas of your upper body.
- ▶ Shortness of breath, with or without chest discomfort.

If you have any of these symptoms, call **911** right away. The sooner you get help, the better.

Jump-start

 —your—

 New Year's

 resolutions!

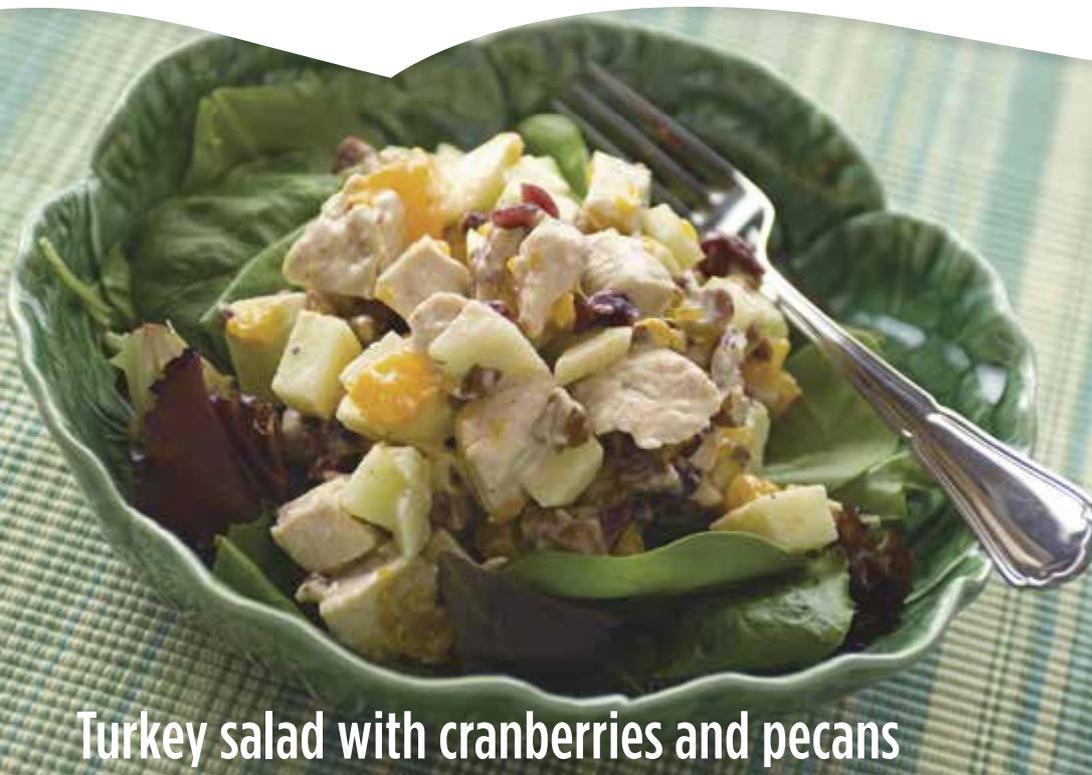
**Attend a free weight

 loss and bariatric

 surgery seminar

 on Jan. 13.**

 See page 2 for more details.



Turkey salad with cranberries and pecans

Ingredients

- 2 cups (8 ounces) diced, cooked turkey breast
- 1 small Granny Smith apple, peeled, cored and diced
- 3 tablespoons dried cranberries, coarsely chopped
- 2 tablespoons chopped pecans
- 1 can (11 ounces) mandarin orange sections, drained and cut into small sections
- ¼ cup fat-free plain yogurt
- 1 tablespoon reduced-fat mayonnaise dressing
- 1½ teaspoons brown mustard
- ½ teaspoon salt
- Ground black pepper, to taste
- 8 Boston lettuce leaves

Directions

- ▶ In mixing bowl, combine turkey, apple, cranberries and pecans. Add orange sections. Set aside.
- ▶ In a small bowl, whisk together yogurt, mayonnaise and mustard. Season to taste with salt and pepper. Drizzle dressing over turkey mixture while using a fork to gently mix in.
- ▶ Arrange 2 lettuce leaves on each of 4 salad plates. Mound ¼ of salad on top of lettuce and serve immediately, accompanied by whole-grain crackers, if desired.

Nutrition information

Makes 4 servings. Amount per serving:

 203 calories, 6g total fat, 1g saturated fat,

 20g carbohydrates, 19g protein, 3g dietary

 fiber, 391mg sodium.

Source: American Institute for Cancer Research

 **NEED NUTRITION COUNSELING?**

See page 2 for details on our services.

TURKEY PREPARATION



REFRIGERATOR

About 24 hours for every

 4–5 pounds of meat.



COLD WATER

About 30 minutes per pound.

 Be sure to change the water

 every 30 minutes.



ROASTING

Set the oven to 325°. Cook

 until the internal temperature of the

 meaty portion of the breast,

 thigh and wing joint is at least

 165°. Cook times will vary,

 but a safe rule of thumb is about

 15 minutes per pound.

Source: FoodSafety.gov