Wright Mayor Ralph Kingan

Ralph’s symptoms were uncomfortable, but not especially painful. He first noticed pressure in his chest when going up and down stairs while vacationing in Salt Lake City over Thanksgiving.

On the advice of his primary care provider, he had a cardiac calcium scoring screening, a quick and painless outpatient test that assesses a person’s risk for heart disease.

The test showed that Ralph had heart disease, and suggested a trip to Campbell County Medical Group Cardiology, and an appointment with Cardiologist Dr. Nick Stamato.

Ric Schuyler, owner of Pokey’s BBQ

Ric could tell that the pain wasn’t just heartburn. It felt like a horse had kicked him in the chest. He got in his car the night of January 7, 2019, and began to drive to the hospital from his home northeast of Gillette. Soon Ric couldn’t take a full breath and had tunnel vision; he barely made it to the Campbell County Memorial Hospital Emergency department (ED). Ric was having a heart attack, and Dr. Sairav Shah was the cardiologist on call that night. Dr. Shah and the Cath lab team quickly performed a procedure to open a blocked artery in Ric’s heart. Rick remembers watching the whole procedure on the monitor in the Cath lab, and felt instant relief from the pain.
I recently attended the American Hospital Association’s Rural Healthcare Conference and theme of the event was disruption. Healthcare is an industry like any other modern industry, in that there are always new and better ways to do things. However, every once in a while something comes along to totally disrupt the way things have always been done in that industry. For instance, what was the last movie you rented from Blockbuster Video? That’s disruption. Streaming services like Netflix have come along and totally changed, or disrupted, the way consumers enjoy movies, sports, and other forms of video entertainment.

Healthcare is beginning to experience the impact of disruption from major technology firms like Apple, Amazon, and Google. These companies are intent on changing the delivery of healthcare, and with their success in most everything else they’ve done, there is no reason to believe they won’t be successful now. So what is a small, rural healthcare organization like CCH to do? Our job is to stay alert to changes in our industry, stay nimble in our decision making, and stay true to our mission. For example, we are expanding some services into areas like telemedicine. We already monitor patients from their homes through our Home Health department, and have our Behavioral Health patients see providers through videoconferencing, but we are researching ways for you to see your CCH provider from the comfort of your home. We are in an evolving and challenging time in healthcare, but we will continue to serve our community by providing a lifetime of care with dedication, skill and compassion.

I am also excited about the Blue Cross Distinction designation for CCH. We are the only healthcare facility in Wyoming with this designation, and there is a good reason for that. It is a very difficult distinction within the Blue Cross organization to achieve clinically and from a cost perspective. Read more about it on page 3 of this newsletter.

Finally, a word on the coronavirus, (COVID-19). CCH prepares for emergencies on a regular basis, and we are prepared for the coronavirus. When faced with the potential of an increase in patients to our organization, we prepare by developing testing procedures for identifying suspected patients, ensuring there are adequate supplies to treat any confirmed patients, and developing a plan for any patients who would require hospitalization. We are fortunate to live in a community where we work closely with our partners in Public Health, the school district and city and county government for a coordinated community response should it be needed.

Sincerely,

Andy Fitzgerald, CEO
The Blue Cross Blue Shield national association establishes uniform criteria to evaluate quality, patient safety and cost, based on objective measures that were developed with input from the medical community and leading accreditation and quality organizations. Only those facilities that first meet nationally established quality and cost measures for Blue Distinction® Centers are considered for designation as Blue Distinction® Specialty Centers+.

Knee and hip replacement procedures remain some of the most commonly performed elective surgical procedures in the U.S., according to a 2018 study released by the American Academy of Orthopedic Surgeons.

“We are thrilled to have achieved the Blue Cross Distinction® Center+ designation”, said Chief Operating Officer Colleen Heeter. “Everyone in the organization is committed to providing Excellence Every Day, and this designation shows that we focus on quality care, great patient outcomes and cost efficiency in our total joint program.”

Facilities designated as Blue Distinction® Specialty Centers+ for Knee and Hip Replacement demonstrate expertise in total knee and total hip replacement surgeries, resulting in fewer patient complications and readmissions. They are on average 20% more cost-efficient in an episode of care compared to other facilities.

For more information about the program and for a complete listing of designated facilities, visit BCBS.com/bluedistinction.

EXCELLENCE IN ACTION

Campbell County Health Awarded the Blue Distinction® Specialty Center+ for Knee and Hip Replacement

The only Wyoming healthcare facility with this distinction!

Complete Care for Knee and Hip Replacement

CCH has a full array of services for our knee and hip replacement patients, from initial diagnosis to rehabilitation after surgery.

Surgeons - The surgeons at Powder River Orthopedics & Spine (PROS) take an innovative and comprehensive approach to treatment of orthopedic pain. They educate patients on the risk and benefits of treatment, helping them to make informed decisions.

Joint Camp - A pre-surgery education program that includes an exercise plan, what to expect after surgery, and what modifications need to be made at home after surgery.

Hospital Stay - Campbell County Memorial Hospital’s Medical Surgical unit has a nursing staff trained in pain management and initiating physical therapy.

Physical Therapy - CCH Rehabilitation Services, conveniently located in the same building as PROS, includes comprehensive therapy and the only therapy pool in Gillette.

Short-Term Rehab at The Legacy - Patients who need more assistance between surgery and going home can stay in the dedicated rehabilitation wing with daily physical therapy and a focus on daily living skills.

Home Health - CCH has professional staff who can provide nursing care, physical and occupational therapy, or help with daily activities in the patient’s home for those who qualify.

Home Medical Resources - Medical equipment for sale or rent to help total joint patients get back to the activities they enjoy.

Go to cchwyo.org/bdcplus to learn more.
Local Heart Attack Treatment Saves Lives continued from the cover

**Wright Mayor Ralph Kingan continued**

Dr. Stamato ordered a cardiac stress test, and Ralph felt the chest discomfort again while on the treadmill. Ralph said that everyone was very calm but insistent, and he was scheduled for the Cardiac Cath lab that afternoon.

Ralph’s wife Jean takes over the story from there, because Ralph doesn’t remember much about his Cath Lab procedure, or his subsequent quadruple bypass heart surgery at the Billings Clinic on January 9, 2020.

“…don’t think you are Superman—don’t wait if you have symptoms, and take care of your health.” – RALPH KINGAN

Ralph recently went back to his job at the Wright Water and Sewer District, where he’s been the Superintendent since 1982.

“Mr. Kingan’s story is one that we hope for in medicine,” said Dr. Stamato. “He was on the verge of a very large, potentially fatal heart attack, and through modern technology and healthcare he now can look forward to a long and healthy life.”

**Ric Schuyler, owner of Pokey’s BBQ continued**

“Acute myocardial infarction (a heart attack) from a blocked coronary artery is a very serious medical condition,” said Dr. Shah.

“Sometimes a heart attack can lead to a very fast, abnormal heart rhythm which can cause a cardiac arrest. It is never a good idea to try and drive yourself to the hospital. The 911 emergency system is there so monitoring of vital signs and heart rhythms, and initial stabilization can begin even before the patient gets to the hospital.”

That wasn’t the end of the story. Ric had experienced a significant heart attack, and also needed heart surgery. Now, a little over a year later, Ric has established a relationship with a primary care provider for regular check-ups and follow-up cardiology visits. He’s back to his usual schedule as the owner of Pokey’s BBQ, and shares some advice he wishes he would have taken himself: **If you are having chest pain and think it might be your heart: Call 911 immediately!**

**Troponin testing aids in heart attack diagnosis continued from the cover**

The test is so accurate that if the hs-troponin test is normal, the chances that a patient in our emergency room is having a heart attack are well under 1%.

After CCH started using this blood test a number of our regional hospitals followed suit, and it is quickly becoming the standard of care across the United States, helping us provide better, safer care for our patients—saving heart muscle and lives.

**Welcome to Our New Provider**

Shireen Haque, MD
Anesthesiology

Learn more at cchwyo.org/heart or call 307-688-3700.
Questions for the Experts
We asked members of our medical staff to answer some common questions they hear from their patients.

Q: Should I take my child to a pediatrician or a family medicine doctor?

A: There are advantages to seeking care from both pediatricians and family medicine doctors. Pediatrics is the practice of medicine which focuses on the health and well-being of children, from birth to adulthood. Pediatric care can be provided by both pediatricians and family medicine providers.

Pediatricians spend at least three years after medical school caring exclusively for children, focusing on the physical, emotional, and social health of infants, children, adolescents, and young adults up to age 21. Some pediatricians continue to see their patients into their early 20's if they have special needs or developmental disabilities. As children grow older, pediatricians see kids for health supervision of proper growth and childhood development, provide guidance about disease prevention and wellness, and give vaccines for protection against serious diseases. At age 21, your pediatrician can help you find an adult medicine or women's health provider that can take over your child's care.

Both pediatricians and family medicine doctors also provide urgent visits for sick symptoms, including seasonal respiratory illnesses, viral syndromes, ear infections, rashes, and migraines.

Family medicine providers are uniquely trained to care for both adults and children in many different aspects of health. One difference between a pediatrician and family medicine provider is that a smaller portion of a family medicine doctor’s training is focused on disease and chronic illness in children. Family medicine providers receive training in caring for children, but they also learn about women's health, obstetrics, critically ill adults, and the elderly. They can perform minor surgical procedures, deliver babies, and manage many common health conditions. A family medicine doctor can provide care for both you and your children, getting to know your family’s health history and issues. It can be convenient to see just one doctor and develop a long-term relationship with them. This provider becomes an important part of your family, caring for all of your family's healthcare needs.

The most important thing, whether you choose a pediatrician or family medicine provider, is to find someone you trust.

Q: Is there anything I can do to reduce the cost of my prescriptions?

A: It is extremely important for you to take all the medications prescribed by your doctor. But, I understand how difficult it can be for people with limited incomes. A recent poll from Kaiser Family Foundation found that 29% of American adults are not taking medications as directed, either skipping or splitting doses, opting for over-the-counter medication instead or not filling their prescriptions at all, in order to cut costs.

So, what can you do?
1. Try generics. Generic drugs have the same active ingredients as brand-name medications, but generics are substantially less expensive. Ask your provider if a generic version is available.
2. Get a bigger dose. Some prescription medications can be divided with a pill splitter. Ask your doctor if that’s the case with your medication, and if it’s possible to get a double dose. Some medications cannot be split, such as capsules or tablets that are enteric-coated, or those that release medicine over time.
3. Get a larger supply. Instead of getting a prescription that lasts for 30 days, and making an insurance copay each time, ask for a 90-day supply so you can make just one copay every three months. This works for medications you take long-term.
4. Apply for assistance. There are many kinds of prescription assistance programs, offered by state and local governments, Medicare, nonprofit groups, and even drug makers. Nonprofit organizations include: Needy Meds and Partnership for Prescription Assistance.
5. If you’re on Medicare, consider updating your plan. Medicare plans can change from year to year, including the medications they cover, and the copays and deductible amounts. You have an opportunity to switch Medicare plans during the annual enrollment period from October 15 to December 7. Review the options using Medicare’s personalized plan search on its website, medicare.gov. If you have Medicare Part D, fill your prescriptions at one of your insurance company’s preferred pharmacies, which should be listed on their website, to pay a lower co-pay.

continued on page 6
The public will have a chance to see the hospital's new Medical Surgical and ICU patient rooms on May 12, before they open to the public after Memorial Day. Called the Inpatient Room Replacement Project, construction began in 2017 to create a total of 40 new patient rooms above the main lobby of Campbell County Memorial Hospital. The first part of the project, new rooms for moms and babies called the Maternal Child Unit, opened last fall to rave reviews from patients and staff. While patient rooms had received cosmetic updates over the years, this project is the first time new rooms have been constructed since the hospital was opened in 1981.

Washing Your Hands

Keeping your hands clean is the number one way to prevent the spread of infection. But when and how often should you clean your hands?

Clean your hands:

- Before eating
- After taking out the garbage
- During and after preparing food
- After petting animals
- After using the bathroom
- After visiting or caring for someone who is sick
- After coughing, sneezing or blowing your nose
- Whenever your hands look or feel dirty

Inpatient Room Replacement Project

GRAND OPENING CELEBRATION – MAY 12

Questions for the Experts continued from page 5

6. Shop around. Medication retail prices vary. Some pharmacies buy directly from drug makers; others use a middleman, which can drive up prices. Call pharmacies in your area to compare prices, or use a computer or smartphone app to do the work for you, such as WeRx or GoodRx.

7. Pay the retail price instead of using insurance. Insurance companies routinely make changes to their coverage, and can reduce or eliminate coverage on certain drugs.

8. Know your insurance. Learn the details of your health plan. If you have Medicare Part D, fill your prescriptions at a preferred pharmacy to pay a lower co-pay.

Are you looking for a healthcare provider? Check cchwyo.org/findadoc.
WWAMI stands for Washington, Wyoming, Alaska, Montana and Idaho, and serves students from those states who don’t have their own medical schools. The state of Wyoming began its affiliation with the University of Washington School of Medicine in 1997, with 10 students who started their medical education at the University of Wyoming and completed their medical degrees at the University of Washington in Seattle. The WWAMI program reserves 20 seats each year for qualified Wyoming residents. Students accepted to the program spend 18 months on the University of Wyoming campus, and their third and fourth years are spent at selected clinical sites throughout the WWAMI region.

As of August 2019, 343 Wyoming students have entered the WWAMI program, with 80 students currently enrolled. A total of 161 students have completed residency training and 66% have returned to Wyoming to practice medicine.

WWAMI graduates on the CCH medical staff include Katie Houmes, MD, and Steven Clements, MD, Hospitalists; Jake Rinker, MD, General Surgery and Doug Watt, MD, Radiology. The WWAMI program also includes clerkship programs for third-year medical students in several specialty areas. Community-based clinical faculty volunteer their time to educate those medical students. In Gillette those clerkship opportunities are in Internal Medicine with Dr. Nick Stamato, CCMG Cardiology; and Obstetrics and Gynecology with Dr. Angela Biggs, Summit OB GYN.

WWAMI also sponsors the R/UOP (Rural/Underserved Opportunities Program) for students completing their first year of medical school. They spend four weeks working with rural physicians to encourage medical practice in rural communities. The program gives students the opportunity to discover how patients receive healthcare in places without the highly specialized resources of the academic setting in Seattle, WA. WWAMI Student Marina Tkachenko did her 2019 R/UOP rotation with Dr. Erica Rinker at CCMG Family Medicine.

Thank You For Your Service
Each year CCH recognizes the medical staff for their service to the community. The providers below have reached service milestones as they continue to care for their patients.

40 YEARS OF SERVICE
James Naramore, MD
Family Medicine

35 YEARS OF SERVICE
Erik Johnsrud, MD
Anesthesiology

25 YEARS OF SERVICE
Stan Lawson, MD
Emergency Medicine

20 YEARS OF SERVICE
Nathan Simpson, MD
Spine Surgery

Jennifer Thomas, MD
Family Medicine

15 YEARS OF SERVICE
Angela Biggs, MD
Obstetrics and Gynecology

Rodney Biggs, MD
General Surgery

10 YEARS OF SERVICE
Attila Barabas, MD
Urology

Kris Canfield, MD
General Surgery

Mark Kellam, MD
Emergency Medicine

Kelly McMillin, MD
Family Medicine
Walk to End Alzheimer's
Saturday, September 12, 2020
Lasting Legacy Park
10 am: Registration and Check-in
11 am: Walk begins
12 pm: BBQ celebration
Registration is free, though fundraising is encouraged.
Register at act.alz.org/CampbellCounty

Know Your Numbers
Monday-Thursday: 6 am-noon
Friday: 6-11 am
1901 Energy Court, Ste. 125
Wellness blood tests and health screenings
307-688-8051 or cchwyo.org/screen

Get in Line Now
Save your place in line at the Walk-in Clinic. Click the button on our website, choose the time you’d like to come in and we’ll save your spot. We’ll send you a text message when it’s time to show up.
The Walk-in Clinic is open 7 days a week, with fast, convenient care for the whole family.
cchwyo.org/walkin

Campbell County Health complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, sex, gender, gender identity or sexual orientation.
ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística.
ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung.
The full nondiscrimination statement can be found at cchwyo.org/nds

Contact Us
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