Before Jo Petterson hit the ground, she knew the fall coming out of her camper on the last day of vacation in the Big Horns wasn’t good. As her family scrambled to pack everything up so she could get medical attention, Jo struggled with deciding if it was best to seek treatment in Buffalo, make the long drive to Billings or head home to Gillette.

“We [her family] had a major trauma 10 years ago and my husband didn’t have this circle of care I have received. I just wanted to be home.”

Several hours later, Jo waited in the Campbell County Memorial Hospital Emergency Department to find out just how much damage had been done to her leg. A bad break in her tibia would ultimately lead to a five-hour surgery and months of follow-up care. But from the moment Jo entered the hospital, through the surgery with orthopedic surgeon Dr. Robert Grunfeld and onto rehabilitation services, she said she’s had incredible care from doctors, nurses, therapists and everyone she’s encountered.

“I’ve never been in a situation where I needed these types of services,” Jo said. “We have the full circle of care here from the minute you step into the emergency department until now. It’s a complete circle I didn’t realize we have.”

One of her first points of contact after the emergency department was with Dr. Grunfeld, with Powder River Orthopedics and Spine (PROS), who performed the reconstructive surgery on her leg.

“We’re like the autobody repair shop taking care of the initial damage,” Dr. Grunfeld said. “The vast majority of surgeries I do require intense physical therapy and occupational therapy afterward.”

Dr. Grunfeld recommended that Jo utilize The Legacy Living and Rehabilitation Center’s Short Term Rehabilitation, where rehab specialists could work with her one-on-one for a few weeks before having to make the transition home.

Emily Swanson, Jo’s physical therapist assistant at The Legacy could easily access all of Jo’s records and medical history through the hospital’s medical record system, making it easier for her to glean important information and understand Jo’s situation.

While at The Legacy, Emily worked with Jo on skills she would need once she returned...
CEO Update

We are always dedicated to growing and improving at Campbell County Health. We know that we can’t ever stop and say, ‘we’ve arrived’ because keeping people healthy and safe is serious business without an end date. Last month we were again named a Top 100 Rural Hospital by the National Rural Health Association. While the recognition is nice, and it’s good to pause to thank our employees for the incredible work they do, we don’t want to just stop and pat ourselves on the back because there are always ways we can improve.

That’s why we have embarked on a multi-year journey to earn the Malcolm Baldrige National Quality Award. The process of applying for the Baldrige Award is forcing us to take a hard look at everything we do and how we can improve—from engaging the community, communicating with our workforce, developing strong strategic planning and becoming consistent across the board in all of our processes. The structure of the application process makes us think long and hard about who we are and question why we do things the way we do. It’s hard work, but it’s bringing real growth and improvement.

One significant place we know we can improve is our electronic health record (EHR) and patient billing. We’ve been working for almost a year to have our medical clinics use the same patient EHR system as the hospital, and develop a more consolidated billing process.

What does this mean for you? Less paperwork to complete when you need a healthcare service, a streamlined registration process for clinic visits and other tests like Lab and X-rays, and a single, better My Health Home online medical record.

By the end of the summer, patients will be able to see most of their healthcare activity in one place—from clinic visits, hospital visits and medications, to radiology imaging and lab results. You’ll even have the ability to communicate with your provider via a secure online connection.

These are big changes, and they’ll be taking place over the next six months. Our clinics will implement the new EHR system in a staggered process, to make sure things go smoothly for patients. At about the same time, our patient billing services will be improved. You will be able to go to one location (the old Pioneer Manor building) to talk with an account counselor about almost any bill you receive from us. Your bill will be easier to read and consolidated—meaning all charges from us, whether it’s from a clinic or the hospital—will be on one bill. (This won’t include outside entities, like radiology or separate specialty services like the surgeon, but it will include most everything from CCH.)

We are pleased to make these changes, and to continually find ways to serve you better. Please do not hesitate to contact us with any suggestions, feedback or concerns.

Sincerely,

Andy Fitzgerald, CEO

MEET OUR NEW PROVIDERS

CRNAs, (Certified Registered Nurse Anesthetists) are advanced practice registered nurses who are the primary providers of anesthesia care in rural America. CRNAs and anesthesiologists, who are physicians, work as a team to provide anesthesia for surgical, obstetrical and trauma patients.

Bryce Dougal, CRNA Anesthesiology

Amber Knuths, CRNA Anesthesiology

Shawna Martin, CRNA Anesthesiology

Jared Weishaar, CRNA Anesthesiology

Complete information on all our medical providers at cchwy.org/findadoc.
Gaining Momentum for Improved Patient Services

CCH is revving up in three key areas to make your experience at our hospital, clinics and billing services better. By the end of this summer, patients will see:

**An easier-to-read patient bill.**
Most all of the services you receive from Campbell County Health will be included in one patient bill. No need to talk to different people about bills from one of our clinics and the hospital. The bill itself is also being redesigned to make it easier to read and understand, something we know has been a problem for a while. (You’ll still receive separate bills for some services, such as the radiologist and surgeon).

**A simpler registration process.** A major software upgrade will bring the hospital and clinics onto a single computer system, so patients won’t have to register multiple times in multiple places. We know how frustrating it can be to have to repeat the same information over and over again.

**A better picture of your total care.**
Providers in the hospital and all our medical clinics will have easy access to all the information they need to take care of you in one place. This saves valuable time when coordinating your care.

Along with these important changes, we’re also improving the My Health Home online medical record. You’ll be able to see your doctor’s notes from hospital and clinic visits and have a record of your medications, allergies, medical conditions and immunizations. You will be able to view all your lab and radiology test results, request prescription renewals and even send secure online messages to your provider. It’s a great way to be proactive about your health, and we’ll be letting you know how to sign up.

**What happens first?**
The first piece of this complicated puzzle is combining our different billing areas into one location, happening in late April. Hospital billing and clinic billing, now called Patient Financial Services, will relocate to the main level of the Pioneer Building, (the old Pioneer Manor long term care facility) across the street from the hospital at 900 West 8th Street. The site has convenient parking and easy access to pay your bill or visit with a financial counselor.

Like any large project, there will be bumps along the way, and we ask for your patience as you may experience slower service than you’re used to, or we expect to provide in the coming months. Our employees and providers have been working for almost a year to make this transition as smooth as possible, because they always want your experience with CCH to be easier, simpler and better for you and your family.

---

**EXCELLENCE IN ACTION**

**Improved Patient Services**

**CAMPBELL COUNTY HEALTH**

**LIVING AND REHABILITATION CENTER**

**THE LEGACY**

**Medicare.gov Overall Rating**

Better than the national average on:

- [+—] Time spent per resident, per day by nursing team
- [+] Fewer signs of depression for long-stay residents
- [+] More short-stay residents moving around on their own

*Nursing homes that are certified by Medicare and Medicaid regularly report clinical information for each of their residents to the Centers for Medicare and Medicaid Services (CMS). CMS assigns nursing homes a quality of resident care star rating based on their performance on 16 measures. These measures reflect, on average, how well nursing homes care for their residents. There are two categories of residents: short stay are those who spent 100 days or less and long stay are those who spent 100 days or more in a nursing home. Rating is based on data collected through September 30, 2017.*
home and helped her find the assistive equipment that worked best for her.

“It’s the convenience of having all that information at a click of a button,” Emily said. “It was an easy hand-off to her outpatient therapist.”

Those three weeks at The Legacy followed by several days of physical therapy each week have helped Jo on the healing journey. Lisa Haugen, her current therapist at Campbell County Health’s Rehabilitation Services has helped Jo continue her recovery process.

“There’s been tears because they push just enough to know it’s working,” Jo said. “They were emotionally able to push me like I needed to be pushed. They’re encouraging – they tell me what I need to hear.”

Her therapist Lisa also helps keep Dr. Grunfeld abreast of Jo’s progress and any areas of concerns she sees.

“It makes the doctor aware of where they’re at on the recovery process,” Lisa said. “It helps him determine if they’re ready to get back to work or driving.”

For Dr. Grunfeld, the continuum of care at Campbell County Health is a real asset to the patient. He enjoys working closely with therapists, nurses and others who help his patients continue their recovery process, and he says he’s seen that circle of care aid in the patient’s recovery.

“Seeing patients the day of or day after the injury and following them through the process is something I’m able to do because of the ongoing communication between myself and others working with the patient,” said Grunfeld. “They look like a different human being as the weeks and months go by.”

While six months later Jo is still in the recovery process and knows there’s much more to do to get back to where she was before the fall, she says she’s thankful for all the people at CCH who have helped her along the way.

“I’ve come a long way, but I still have a long way to go,” Jo said. “It is a lot longer than I ever thought for recovery.”

Jo is grateful for the support of her employer, Long’s Plumbing and Heating, during her treatment and recovery.

Rehabilitation Services

You have a choice when it comes to your therapy. Our comprehensive team of physical, occupational, and speech therapists; orthotics and prosthetics specialists; and functional and athletic health professionals is the most comprehensive in the region, treating patients in their homes, in the hospital and in our outpatient rehab facilities.

**MODALITIES AND METHODS INCLUDE:**

- Aquatic therapy – only at CCH
- Body-weight supported gait training – only at CCH
- Baltimore Therapeutic Exercise (BTE) machine – only at CCH
- Cognitive rehabilitation
- Cupping, dry needling and kinesiotaping treatments
- Neurologic rehabilitation for stroke and concussions
- Orthopedics
- Personal training, including post-rehab
- Pediatric therapy
- Pelvic health
- Post-cardiac
- Post-surgery
- Splinting
- Sports Medicine
- Sports training – EXCEL and ICAN EXCEL athletic training programs
- Swallowing studies
- Vestibular rehabilitation
- Work health, return to work evaluations and therapy, industrial rehab
- Wound care

Call Rehab Services at 688-8000 and talk with our professional staff to see if you could benefit from one of our rehabilitation therapies.

cchwyo.org/rehab
Questions for the Experts
We asked members of our medical staff to answer some common questions they hear from their patients.

Q: Do I really need to establish with a primary care provider?
A: Regardless if you believe you are too young, too healthy, too busy, or possibly...too tough... to need a primary care provider, there are multiple health and wellness benefits. Establishing care with a primary care provider results in a stronger patient-provider relationship and subsequently better medical care and disease management. Primary care providers help to coordinate patient care and provide access to acute care treatment, chronic disease management, screening and preventative healthcare options, and referrals for specialized treatment. Over time, your provider will get to know your health history and your personality, and they will be quicker to identify signs or symptoms indicating a change to your health. Primary care providers not only educate you regarding your current health status, they can help you prevent future illnesses by performing routine physical examinations, labs, vital signs, and measurements. For example, simple routine testing by a primary care provider such as annual blood sugar readings may reveal diabetes, which could possibly go unnoticed for years and result in serious medical complications. In some practices, establishing with a provider will also allow you to schedule same-day or next-day appointments, resulting in decreased urgent care costs and charges. Primary care providers treat the whole patient, not just their symptoms or disease, with a comprehensive and patient-centered approach. Establishing with and regularly visiting your provider, allows both you and your provider to make the best decisions for your health today as well as your health in the future.

Q: Should I be worried about my varicose veins?
A: Varicose veins are enlarged veins that can be blue, red or flesh colored. They are often (but not always), raised above the skin on legs and look like twisted, bulging cords. Varicose veins occur when the valves in the veins that regulate blood flow direction from the legs toward the heart no longer function properly, causing blood to pool in the legs, a condition called venous insufficiency. Venous insufficiency can become chronic and result in leg swelling, cramping, aching, heaviness or tiredness, itching, open skin sores, and restlessness of the legs. Recent studies also show a correlation between varicose veins and deep venous thrombosis (DVT) which can be a precursor to pulmonary embolism (PE) which can be fatal. Nearly 25% of the global adult population is afflicted with Chronic Venous Insufficiency (CVI), and don’t even know they have the problem. Some symptoms of CVI include:

- Varicose veins
- Swelling
- Heaviness or tiredness
- Open skin sores
- Aching
- Cramping
- Itching
- Restlessness

Both varicose veins and CVI can be treated effectively. I perform minimally-invasive treatment for CVI and varicose veins that uses radiofrequency ablation (heat) to seal off the problem vein so blood gets re-routed to other veins that are functionally normally. These procedures are done as an outpatient with no downtime and an immediate ability to walk and do activities after the procedure in most cases.

The reason that most people do not know they have this problem is because an ultrasound exam is required to diagnose it. The ultrasound allows us not only diagnose venous insufficiency but also pinpoint the location. The procedure is performed under sterile conditions and can be done in the Cardiac Cath Lab or office setting. You don’t need a doctor’s referral to come and see us for further evaluation and an ultrasound if you exhibit any of these symptoms or have any concerns about the way your legs feel.

Volunteering does more than make you feel good
If you are ready to make friends, improve your mental and physical health, and maybe develop new skills along the way, start volunteering. Long-term volunteers have longer lives, less disease, and better overall health. One report says that people who volunteer over 100 hours a year are some of the healthiest people in the U.S.

Campbell County Health has a volunteer opportunity that fits your age, interests and schedule. Visit cchwyo.org/volunteer to learn more.
TURP Procedure Gives Patient ‘Immediate Results’

By Kim Phagan-Hansel

As Story, Wyoming, resident 64-year-old John Matejov got older, he increasingly had difficulty emptying his bladder. Figuring it was just something that goes along with aging, John continued to live with the ailment that is commonly caused by an enlarged prostate, and is quite common in men his age. But when he heard about a procedure that could help, he decided to look into it further.

“I was getting up three to four times a night,” John said. “It felt like I was spending my whole life peeing and nobody wants to do that.”

That led him to Dr. Attila Barabas at the Campbell County Medical Group (CCMG) Urology Clinic. A board certified urologist in Gillette for more than seven years, Dr. Barabas treats men and women for everything from kidney stones and urinary incontinence, to vasectomies and erectile dysfunction, to the enlarged prostate that brought John to seek his help.

“A lot of people do suffer with these ailments,” Dr. Barabas said. “And there’s treatment that can be a huge benefit and improve the quality of life.”

For many patients, ailments that slowly occur over a long period of time can be something easily labeled as just something you have to deal with as you get older. And while it’s not always easy to have a conversation with a doctor or nurse about some of the ailments Dr. Barabas treats, having them properly addressed can drastically improve a patient’s life.

John said Dr. Barabas and his staff made him feel at ease with the transurethral resection of the prostate, or TURP, procedure and the conversations around treatment and post-operation care.

“Our goal is to provide the highest possible care for our patients,” Dr. Barabas said. “It can make a big difference in their quality of life.”

“It’s very humbling,” John said. “You leave your dignity at the door. They made this uncomfortable, undignified procedure more than bearable. You don’t feel like a problem, you feel like a person with a problem they want to help you with.”

Since having the procedure done, John has had positive results and said he feels like he’s enjoying his life more.

“I got almost immediate results,” John said. “It gave me my sleep back. If you want to change your life, get your sleep back, have it done.”

Learn more at cchwyo.org/urology.

Urology
This specialty focuses on diseases of the male and female urinary tract and male reproductive system. Urologists use minimally-invasive surgical techniques and medical treatment for:

- Kidney stones
- Erectile dysfunction
- Prostate cancer
- Incontinence
- Enlarged prostate
- Vasectomy

SAVE THE 2018 DATE!
APRIL 12 - 14, 2018
CAM-PLEX Energy Hall • Gillette, Wyoming
Visit cchwyo.org/emsu to register

EMS University provides an opportunity for emergency medical professionals to learn and discuss relevant patient care and management issues, and network, meet, and stay connected with other EMS professionals. Continuing education credits are available for all courses.
### SCREENINGS

**Assessing your Health: Take an Inventory**

There are some great online tools available to help you assess your current health and better manage your overall health. Go to [cchwyo.org/assess](http://cchwyo.org/assess) for links to general health assessments, nutritional habits, mental health and hearing loss quizzes you can take yourself, put together by Rachel Wilde, PBT, CPT, MA, from CCH Wellness. At Wellness, you can receive daily community blood draws, lab tests, and health and wellness screenings from 6-11 am Monday-Friday at 1901 Energy Court, behind Wendy’s. Go to [cchwyo.org/wellness](http://cchwyo.org/wellness) or call 688-8051.

---

**EVERYONE** | **Ages 18-39** | **Ages 40-49** | **Ages 50-64** | **Ages 65 and older**
---|---|---|---|---
Blood pressure | At least every 2 years | At least every 2 years | At least every 2 years | At least every 2 years
Cholesterol | Every 5 years starting at age 20 | Every 5 years | Every 5 years | Every 5 years
Colorectal health | | | Yearly | Yearly until age 75; after that, discuss with your doctor
*High-sensitivity fecal occult blood test (FOBT)* | | | Every 5 years | Every 5 years until age 75; after that, discuss with your doctor
Flexible sigmoidoscopy | | Every 10 years | Every 10 years | Every 10 years until age 75; after that, discuss with your doctor
Colonoscopy | | | | |
Diabetes | Discuss with your doctor | Start at age 45; then every 3 years | Every 3 years | Every 3 years
Skin exam (for cancer) | Monthly self-exam; by a doctor as part of a routine full checkup starting at age 20 | Monthly self-exam; by a doctor as part of a routine full checkup | Monthly self-exam; by a doctor as part of a routine full checkup | Monthly self-exam; by a doctor as part of a routine full checkup

---

**WOMEN** | **Ages 18-39** | **Ages 40-49** | **Ages 50-64** | **Ages 65 and older**
---|---|---|---|---
Breast health
*Mammogram* | | | | |
Clinical breast exam | At least every 3 years starting in your 20s | Yearly | Yearly | Yearly
Bone density (osteoporosis screening) | | | Get a bone density test if you’re at increased risk; discuss with your doctor | Get a bone density test if you’re at increased risk; discuss with your doctor
Pap test | Every 3 years starting at age 21. From 30 to 39, every 3 years, or every 5 years if combined with an HPV test. | Every 3 years, or every 5 years if combined with an HPV test. | Every 3 years, or every 5 years if combined with an HPV test. | |
Pelvic exam | Yearly starting at age 21; discuss with your doctor if you’re younger than 21 and sexually active. | Yearly | Yearly | Yearly
Sexually transmitted infections (STIs) | Get screened for chlamydia if you’re 24 or younger and sexually active; discuss screenings for other STIs with your doctor | Discuss with your doctor | Discuss with your doctor | Discuss with your doctor

---

**MEN** | **Ages 18-39** | **Ages 40-49** | **Ages 50-64** | **Ages 65 and older**
---|---|---|---|---
Abdominal aortic aneurysm | | | Once between ages 65 and 75 if you’ve ever smoked | |
PSA blood test (prostate-specific antigen; not routinely recommended) | | | Discuss pros and cons with your doctor starting at age 50 | Discuss pros and cons with your doctor

---

*Mammography screening recommendation from the American Cancer Society
Sources: Agency for Healthcare Research and Quality; American Cancer Society; American Diabetes Association; Centers for Disease Control and Prevention; U.S. Preventive Services Task Force
UPCOMING EVENTS

Senior Health Fair
Friday, April 20 from 9 am-2 pm
Senior Center classrooms, 701 Stocktrail Avenue

Members of the Campbell County Senior Center can participate in the annual Senior Health Fair. Blood draws will be held on Tuesday, April 17 from 6-9 am. Choose from 10 different low-cost blood screening panels, including the popular Wellness Panel (cholesterol, glucose and thyroid).

At the Health Fair:
• Pick up blood screening results and have them reviewed and explained by a CCH Wellness professional
• Complimentary blood pressure screening
• Local and regional vendors and exhibits

Call the Senior Center at 686-0804 for more information.
cchwyo.org/seniorhf

Diabetes Support Group
Starts April 12 and meets monthly from 6:30-8 pm
Ground Floor Conference Room by the hospital cafeteria

A diagnosis of diabetes can bring many challenges for the patient and their family. CCH Certified Diabetes Educator and Registered Dietitian Heidi Gillette understands what patients with diabetes experience every day. Heidi lives with diabetes herself and hopes a new support group can help.

“It can be such a relief to talk to others that are dealing with the same issues you are,” said Heidi. “It’s a chance to learn and share.”

Call Heidi at 688-3615 to learn more.
cchwyo.org/diabetes

Skip the Wait
Save your place in line at the Walk-in Clinic by using Skip the Wait. Click the button on our website and choose the time you’d like to come in. We’ll send you a text message when it’s time to show up.
cchwyo.org