On Saturday afternoon, Suzanne was watching after her youngest granddaughter, when her daughter, Rebecca, started to notice that something was different about her mom—Suzanne was having trouble moving and speaking with them. They immediately called 911. Suzanne was transported by ambulance to Campbell County Memorial Hospital, and then life-flighted to Wyoming Medical Center. There they learned that Suzanne suffered a left-hemisphere stroke—the side of the brain that controls the ability to speak and understand language for most people.

When Suzanne was discharged from the hospital, her doctor suggested that she spend a few weeks in Elkhorn Valley Rehabilitation Hospital in Casper recovering from her stroke. While she was there, she and her husband, Craig, realized that she needed additional help recovering, especially with her speech. They began by searching the internet, and were pleasantly surprised to learn that there was a speech and language therapist right in Gillette.

“Before I started therapy, I couldn’t even say, ‘cup of coffee,’” says Suzanne. “I could picture it in my mind, but I couldn’t say it. The words just wouldn’t come out right.”

When you don’t have a voice, you feel isolated.

According to Whitney White, MA, CCC-SLP, Speech and Language Therapist.
CEO Update

As you’ve likely heard, Campbell County Health was recently named a Top 20 Rural Community Hospital in 2017 by the National Rural Health Association. Being recognized on a national level validates the extraordinary skills of our staff and physicians, and is a sign that our efforts to provide excellence every day is something that’s becoming well engrained in all that we do. This award came on the coat tails of receiving an “A” grade for hospital safety from Leapfrog. These awards demonstrate our hard work in recent years to improve quality and care.

Another aspect of delivering high quality care is creating an efficient, well-designed facility that supports the safety, wellness and healing process of our patients. To that end, we will soon begin a thorough remodel of our patient care rooms.

If you’ve stayed with us for medical surgical, ICU or OB care, you likely know why this remodel is terribly needed. The current rooms were not built with the needs of today’s care practices in mind. They are small, awkward, and limited when it comes to accommodating equipment, providers and families. The new patient rooms will create a functionally effective work space and flow, and will serve us well for the next 40 to 50 years.

Besides bringing our patient care rooms into the modern era, the remodel also accommodates the demands of our expanding services. We’ve grown our cardiology services and cath lab extensively in recent years, which has increased our need for more and better equipped intensive care (ICU) rooms. In addition, our surgery team—both general and orthopedic—are doing more surgeries than ever. With the new model, our med/surg rooms will flow into the ICU so we can take care of patients in a much more continuous way. Finally, the new rooms will fundamentally change how we deliver OB care as we are creating LDRP rooms where moms can labor, deliver, recover and receive postpartum care all in the same room, with her family nearby.

As we progress on the remodel, we will also be working on finding highly qualified staff. We’ve implemented new workforce development, recruitment, retention and engagement efforts so that when the project is complete in three years, we’ll be ready.

Sincerely,

Andy Fitzgerald, CEO
Campbell County Memorial Hospital Recognized as a Top 20 Rural Hospital in the United States

If you’ve been to the hospital lately, you may have seen some new graphics and signage celebrating our recognition by the National Rural Health Association as a Top 20 Rural Community Hospital. You might be wondering the significance of this award.

The Top 20 Rural Community Hospital winners are those hospitals who have achieved success in overall performance based on a composite rating from eight indices of strength: inpatient market share, outpatient market share, quality, outcomes, patient perspectives, costs, charges and financial stability. This group was selected from iVantage’s Top 100 Rural Community Hospital list, released earlier in the year.

“Campbell County Health is proud of the efforts of the physicians and staff who have contributed to our hospital achieving this designation,” said Andy Fitzgerald, CEO. “Along with our 4-star patient experience rating from Medicare and our A grade from the Leapfrog Group for patient safety, this achievement demonstrates our commitment to Excellence Every Day. Our results as a top health care provider means our community can count on us to deliver the services they need now and in the future.”

Physicians in Training

If the doctors you see at Campbell County Memorial Hospital or the Main Clinic seem to be getting younger all the time, maybe they are. Campbell County Health is pleased to welcome medical students in Internal Medicine from the WWAMI (Washington, Wyoming, Alaska, Montana, Idaho) program for their six-week clerkship rotations this spring and summer. Each state participating in WWAMI partners with the University of Washington School of Medicine (UWSOM) to educate a fixed number of medical students from and for their state.

One of the major goals for Wyoming’s participation in the WWAMI program is to encourage Wyoming students to return to the state to practice medicine. That’s one of CCH’s goals too, according to Dr. Nick Stamato, CCH Cardiologist and local WWAMI faculty. “It’s a great opportunity to show these students what it’s like to practice in a great facility located in a great community”, said Dr. Stamato. “If they get to know us and like us they may decide to come back and practice”.

Our first student is Heather Stevens. Heather grew up in Seattle, and her rotation in Gillette marks her first trip to Wyoming. She is a third year medical student with an interest in primary care. Heather is excited to explore the wide-open plains of Wyoming when she’s not learning from local WWAMI faculty like Dr. Nick Stamato, CCMG Cardiology.

Since Wyoming became involved in the WWAMI program in 1996, 114 Wyoming students have completed their residency training and 83 of them, or 73 percent, have returned to Wyoming to practice medicine.
Did you know that 73 percent of child passenger restraints are used incorrectly? Safe Kids Campbell County provides our community with free car seat checks by appointment, safety seat events, bike rodeos and much more to help educate our children. At CCH Emergency Medical Services, there are nine nationally certified Child Passenger Safety Technicians on staff who can perform free car seat checks. From May 2016 to April 2017, 142 child safety seat inspections were done, and nearly 3,200 people attended child passenger education, which includes bike safety, child passenger safety, home safety, infant safety and poison control.

Car seat and child safety seat inspections are held on Wednesdays by appointment at the Emergency Medical Services Base, 502 Stocktrail Avenue. Appointment required. Call 307-688-SAFE (7233) to schedule. Replacement car seats are available for a $30 contribution.

New Equipment Allows Women to Stay Local

Mammography, along with regular self-exams and exams by a healthcare provider are important tools in detecting breast cancer or other abnormalities. Soon local women will have access to another important screening tool—stereotactic breast biopsy.

Stereotactic breast biopsy is a procedure that uses mammography to precisely identify and sample (biopsy) an abnormality within the breast. It is often used when small growths or accumulations of calcium (called calcifications) are detected on a screening mammogram. These calcifications may not appear on an ultrasound or be felt during a physical breast exam. Stereotactic breast biopsies use x-rays to locate and target the area of concern and guide the biopsy needle to the right location. After the sample is collected it is sent to a pathology lab to determine if cancer cells are present. The quicker breast cancer is detected, the faster treatment can begin.

“The closest location for this type of procedure was Sheridan, Casper, or Rapid City, SD,” says Terri Kinney, Director of Radiology and Imaging. “When the new equipment is installed and staff training is completed this summer, we’ll have the ability to do this relatively simple, low-risk procedure right here.”

Stereotactic biopsy takes only about an hour, is less invasive than a surgical biopsy, results in quicker recovery and causes minimal scarring.

Breast Cancer Screenings* for Women with Average Risk

<table>
<thead>
<tr>
<th>Age</th>
<th>Recommendations</th>
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<tbody>
<tr>
<td>Age 40</td>
<td>Talk with your doctor about when to begin screening.</td>
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<tr>
<td></td>
<td>Women should have the opportunity to begin screening if they choose.</td>
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<tr>
<td>Age 45</td>
<td>Begin yearly mammograms.</td>
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<tr>
<td>Age 55</td>
<td>Transition to mammograms every other year or continue with annual mammography, depending on your preferences.</td>
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<tr>
<td>Age 55+</td>
<td>Continue to have regular mammograms for as long as you’re in good health.</td>
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*Source: American Cancer Society, cancer.org
Recovering Speech  continued from the cover

at Campbell County Health Rehabilitation Services, Suzanne was experiencing aphasia and apraxia as a result of her stroke.

“Suzanne had a double whammy,” says Whitney. “People who have aphasia may have difficulty speaking and finding the ‘right’ words to complete their thoughts. With apraxia, a person finds it hard to move their mouth and tongue to speak. Suzanne could picture what she wanted to say, but she couldn’t find the right words, or physically say them.”

According to the Stroke Association, it’s estimated that approximately one third of people will experience some level of communication difficulties after a stroke. A person’s ability to communicate includes speaking, understanding what others are saying, reading, writing and using numbers. Difficulties with communication can make it harder for these individuals to get information, as well as impact their social relationships, independence and self-confidence.

Suzanne started therapy with Whitney before Christmas 2016—attending three, 60-minute sessions each week. The sessions are filled with drills to help the patient retrain their word retrieval. These drills may consist of the therapist starting a sentence with a prompt that the patient will fill in the blanks, or even a question for the patient to solve. For example:

- **PROMPT:** “If the kitchen timer goes off, then…” says Whitney.

- **ANSWER:** “It means the food is done,” replies Suzanne.

- **QUESTION:** “Pete is taller than Dave, but shorter than Chuck. Who is the tallest?” asks Whitney.

- **RESPONSE:** “Chuck,” replies Suzanne.

After each session, Whitney sent Suzanne home with tools and worksheets to practice with before she returned for her next session. According to Whitney, Suzanne has responded incredibly to her therapy—she’s attending therapy once a week now, and is finding her words with greater ease. Suzanne returned to her job at Joy Global in February 2017, and she’s even back to cooking for her family, something she enjoyed immensely before her stroke.

“She’s highly motivated and does a lot of work at home to improve her speech, which proves if you put in the effort you will see the results,” says Whitney.

Suzanne describes her experience with Whitney as excellent. “Whitney has helped me so much. She makes me work for it, but it’s paid off. I’m grateful for her help,” says Suzanne.

To learn more about the Speech Therapy services available at Campbell County Health, visit [cchwy.org/speech](http://cchwy.org/speech) or call 307-688-8000. A physician referral is recommended to receive rehabilitation care such as speech therapy.

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**WARNING SIGNS OF A STROKE**

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<tr>
<td>BALANCE</td>
<td>EYES</td>
<td>FACE</td>
<td>ARMS</td>
<td>SPEECH</td>
<td>TIME</td>
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<tr>
<td>Sudden loss of balance or coordination</td>
<td>Sudden double vision, or loss of vision in one or both eyes</td>
<td>One side of their face is drooping</td>
<td>Can they keep their arms up, or does one arm drift down?</td>
<td>Sudden difficulty speaking or speech is slurred or strange</td>
<td>If they have any one of these signs, it’s time to call 9-1-1 immediately.</td>
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Caring into the Future

Next spring construction will begin on a $28 million project to completely replace every inpatient room in Campbell County Memorial Hospital. With the help of experts from HGA Architects and Engineers, the project has been in the works for over 1 ½ years.

Why is it taking so long? Before drawing any floorplans or finalizing the design, we asked the people who do the actual work of patient care; nurses, nursing aides, environmental services and dietary staff to create their ideal vision of what a patient room should be.

Members of the Patient and Family Advisory Committee (PFAC) looked at the project from the patient and family’s point of view, and the team visited other hospitals in the state and across the country to see the best practices in patient room design.

The group used a process called Lean to analyze the current rooms and the workflow. In the simplest terms, Lean thinking looks at how waste can be eliminated to create value. Waste can be defined in many ways, such as the time it takes a nurse to respond to a patient’s call light, or the distance a family must travel to find a space to gather near the patient’s room.

Facilitated by CCH Process Improvement Coordinator Bud Lawrence, data was collected on every aspect of a patient’s experience in their hospital room, down to how many steps a nurse walks each shift to care for their patients. All the data, ideas from the team, ideas from other facilities and the expertise of the architects were brought together to create a larger, more comfortable and efficient room design for medical surgical, ICU and OB patients. The space above the hospital lobby and the current Maternal Child unit will be turned into 39 patient rooms—basically two new patient rooms for every three existing rooms, along with new waiting rooms and gathering spaces for patients and families.

Financial projections show the project can be funded with existing cash and revenue, though other options are being discussed, such as bond financing. No final decisions have been made yet. The project will take at least 20 months to complete after construction starts, and the Board of Trustees must still decide if the project should be built in two years, or stretch out to four years.

The Problems

- Current rooms are too small to accommodate modern equipment and family members who want to visit or spend the night
- Bathrooms are too small and don't have a sink inside the bathroom
- Maternal child rooms didn’t really work for how babies are delivered and cared for now—mom stays in the same room through her entire say
- The location of supplies and nursing stations are inefficient and prevents nurses from spending more time at the bedside

Helping Patients Heal

“Having family around is part of how patients heal. Right now there just isn’t room for the family to be in one of our current rooms—they feel they’re in the way of the nurses or they can’t stay overnight comfortably.”

Sherry Bailey is the Director of the ICU and one of the 30-plus team members that have been involved in the design of the new patient rooms. A nurse for 25 years, her focus is on the health and safety of both the patient and the nurses she supervises.

“I was surprised and proud to be asked my opinion about the design and function of the rooms,” said Sherry. “We were all given the freedom to say how we could do our work better, and we were listened to. This isn’t about a cool paint color on the walls—it’s about how we can get a better design for more safe and efficient care—to spend more time with the patient.”

Learn more about the project at cchwyo.org/ptrooms.
3 Tips to Help you Choose Sunscreen Wisely

Warm weather is here, and this means time outside in the sun, which also brings an increased risk for sunburns and skin cancer. Check out these three tips on what to look for when selecting a sunscreen.

1. KNOW YOUR NUMBERS
The general recommendation for sunscreen is to wear a Sun Protection Factor (SPF) of at least 15 or greater, year-round. According to the Skin Cancer Foundation: “SPF 15 filters out approximately 93 percent of all incoming UVB rays. SPF 30 keeps out 97 percent and SPF 50 keeps out 98 percent. They may seem like negligible differences, but if you are light-sensitive, or have a history of skin cancer, those extra percentages will make a difference.”

2. LOOK FOR A BROAD-SPECTRUM SUNSCREEN
This offers protection from UVA rays that cause wrinkles of the skin and UVB rays that contribute to skin cancer.

3. CONSIDER THE ACTIVITIES YOU WILL BE DOING WHILE IN THE SUN
For example, if you plan to be in water or playing sports, be sure to purchase water-proof sunblock.

A few other tips for you:
• Re-apply sunscreen every two hours you are in the sun, or directly after swimming, as the sunblock may have worn off and also consider other ways to protect yourself from the sun.

• Consider wearing protective clothing and UV-blocking sunglasses. Hats help protect your face and head, and check into clothing that has sun protection built in.

From the Health Coach:
Gizmos and Gadgets

By Rachel Wilde, PBT, CPT, MA, CCH Wellness

One of the biggest trends in the fitness industry these days is high tech gadgets that can help you to improve your health, fitness and performance through tracking activity, nutrition and more. In addition to tools like fitness watches, you can purchase smart shirts and bands that monitor muscle activity, velocity, force and even GPS pieces that tell you how hard, far and fast you are working.

If you are considering purchasing a gadget or gizmo, you may want to first look at some of the free options you might already have, since apps and tools are often built into our phones and mp3 players.

In addition to pre-installed apps, there are a myriad of apps to use that are free or can be purchased at a low cost that can also help with tracking or planning improved heath. Take a quick look at some of the most popular health apps available at cchwyo.org/fitapps.

The Heptner Cancer Center provides comprehensive cancer care for most types of cancer, including skin cancer. Radiation Oncologist John Stamato, MD, FACRO, treats skin cancer using radiation therapy.

307-688-1950 • cchwyo.org/cancercare
OPPORTUNITIES FOR OUR COMMUNITY

Sports Screenings
Choose the option that’s convenient for you!

Does your child need a physical to play Jr. Football or Jr. High or High School sports next year? The Sports Screening program provides low-cost athletic physicals for local students.

June 22, July 18
June 27, July 11, 13, 27

6 – 8 pm
Call 688-1539 between 9 am-4 pm to make your appointment.
Upper Level of the Stocktrail Building
The entire $30 fee goes toward local school programs and youth scholarships. Sponsored by CCH, local physicians and the Campbell County Healthcare Foundation.

June 27, July 11, 13, 27
Through July 31
8 am – 5 pm
Make an appointment at a Campbell County Medical Group clinic:
- Family Medicine: 688-3636
- Kid Clinic: 688-8700
- Pediatrics: 688-3636
- Walk-In Clinic: 688-9255
- Wright Clinic: 464-0413

A portion of the $30 discounted fee goes toward local school programs and youth scholarships.

Successful Sitters Class
June 22 & July 18
Kids 12-16 learn the basics of babysitting and CPR.

Excel Summer 2017
June 7 – August 16
Physical training to improve overall athletic performance for kids 10-17.

ICAN Excel Summer 2017
May 30 – July 25 (can join anytime)
A fun training and nutrition program for kids 7-10.

Visit cchwyo.org/classes to register.

Campbell County Health complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex.

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

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307-688-1000 or 800-247-5381

Mailing address:
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cchwyo.org