HEALTH NEWS from

SUMMER 2017

ST. Managements REGIONAL MEDICAL VCENTER

Moving forward after a *melanoma* diagnosis

How timely treatment helped Sondra Diel

Also inside:

A NEW KNEE FOR OUR CEO Stan Tatum shares his experience

INTRODUCING THE CANCER CENTER Offering outpatient care close to home

Compliments of

<u>St. Mary's</u>

REGIONAL MEDICAL CENTER

Sondra Diel with her husband, Mike, and their daughters, Kayla and Kassidy.



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discusses his joint replacement surgery

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SONDRA

Her unexpected melanoma diagnosis



At St. Mary's Regional Medical Center, we work hard to provide an environment where patients can feel comfortable and secure, while receiving a high level of care. I had the opportunity to experience that firsthand earlier this year, when I had knee replacement surgery in our Joint Replacement Institute. Preparing for my

procedure and working through recovery and rehab gave me an even greater appreciation for the great strides our staff and patients make every day to overcome different health challenges. I hope you enjoy reading about my experience on page 4, and I thank everyone in the community for your well-wishes and support.

Also in this issue, we tell you about our new Cancer Center, which opened earlier this year to provide vital outpatient cancer care and treatment here in the community. We thank Gwenn Stepanski, who describes her regular visits to the new Center, as well as Sondra Diel, who tells about her skin cancer diagnosis and how early detection helped her get treatment for melanoma.

No matter what your personal health concerns, we understand how important it is for you to find quality, reliable care you can trust. We invite you to learn more in this issue about the many different services we offer at St. Mary's to help keep our patients and community thriving.

stonley

Stanley Tatum *Chief Executive Officer*

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Colonoscopy screening appointments made easier

To help you stay healthy, St. Mary's Regional Medical Center is making it more convenient to schedule your colonoscopy screening. **Simply dial 580-249-3937** for a pre-screening interview with a registered nurse. If you are in good health and meet the criteria, you can skip the pre-procedure physician visit, saving you time and a co-pay. If you are not eligible for a direct scheduled screening, you will be referred to your physician or gastroenterologist prior to being scheduled.

Colon cancer is the third leading cause of cancer deaths*, but it can be prevented with screening. Talk with your doctor about when it's time to schedule your colonoscopy.

*American Cancer Society

Do you have a *wound* that isn't *healing*?



Hyperbaric oxygen therapy available at St. Mary's can help to speed the healing process for select patients.

SUMMER

It can be tempting to

go barefoot when you're

hanging around the pool or enjoying other summer

activities, but especially

diabetes, it's important to

wear proper shoes all the

time to protect your feet

from the hot ground and

other potential irritants,

Spider bites, fireworks

and grill accidents are

other common sources

Brown notes. Being

of summertime wounds,

mindful and practicing

safe habits can help you

make the most of the

warm-weather season.

says Julie Brown.

for patients who have

REMINDERS

SAFETY



Cindy Rogers, MD Medical Director

The Wound Care and Hyperbaric Medicine Program at St. Mary's Regional Medical Center offers comprehensive treatment to help heal persistent wounds associated with diabetes and other conditions. "We don't look at just the wound, but also what's causing it," says Cindy Rogers, MD, Medical Director. The goal is to determine an effective strategy to heal the wound, and then do whatever is needed to keep it from coming back, she says.

To help ensure the best outcomes, treatment is often coordinated with a patient's primary care doctor. Also, because wounds can be associated with other conditions, such as diabetes or vascular issues, other medical specialists may be consulted. A wide range of treatment options are offered, including hyperbaric oxygen therapy. With this procedure, a patient lies down inside a pressurized chamber and breathes 100 percent oxygen to help accelerate the healing process.

As an important preventive measure, Dr. Rogers urges patients who have diabetes to check their feet every day. Sometimes, just a tiny pebble inside the sole of a shoe or a small blister can cause a significant problem, if not detected and addressed early.

"If a wound has not healed in four weeks, we advise people to come see us, and for patients with diabetes, we recommend coming after a couple of weeks, because problems can worsen quickly," says Julie Brown, Director of the Wound Care and Hyperbaric Medicine Program. Treatment often requires commitment and dedication, but once the wound is healed, patients can "have their life back," she says. ■

To schedule an appointment, call 580-548-5010 or for more information visit www.stmarysregional.com/wound.



FROM THE BOARDROOM TO THE OPERATING ROOM:

A humbling and rewarding experience

St. Mary's Regional Medical Center CEO Stan Tatum has spent a lot of time over the years visiting with patients who had joint replacement surgery. Last March, it was his turn.

"I was having a lot of pain in my right knee, especially when I would twist it," recalls Tatum, who enjoys playing golf and doing other activities. "It gradually got worse, and I started having trouble sleeping at night because of the pain," he says.

His Orthopedic Surgeon, Edgar Fike, MD, took an X-ray and explained that he had bone-on-bone osteoarthritis, which happens when the cartilage or natural cushioning between the joints wears down. ► Initially, he helped Tatum manage his condition with medication and fitted him with a knee brace that provided some relief. Eventually, the pain got worse and Tatum decided, along with Dr. Fike, that it was time to have joint replacement surgery.

"Many people ask about timing and when they should consider having joint replacement," says Dr. Fike. "There's a lot we can do for arthritis early on," he says. "At some point, when you stop being able to do the things you enjoy, it's time to start thinking about joint replacement."

CHOOSING THE JOINT REPLACEMENT INSTITUTE AT ST. MARY'S

"Obviously, I'm employed by St. Mary's, so I'm biased, but I also looked at the history of what St. Mary's has done - establishing a designated unit for hip and knee replacement in 2008," says Tatum. "We have a standardized protocol and an isolated unit for just joint patients, which results in great outcomes and the low percentage of complications." At the start of this year, St. Mary's became the first in the state to receive The Joint Commission's Gold Seal of Approval[®] for Advanced Certification for Total Hip and Total Knee Replacement after undergoing a rigorous onsite review. Some people think they have to travel to the "big city" to get the best care, but certification shows that the quality of care at St. Mary's is "top-notch," says

Dr. Fike. "We've been doing this for a long time," he says. "We've been working on it and perfecting it."

READY, SET, RECOVER

Tatum remarked on how the pre-operative educational class at St. Mary's helped prepare him for surgery and defined realistic timelines and expectations. It also taught him about adaptive equipment he would need after surgery, and how he would be up and walking, with assistance, the day of surgery.

The most rewarding part, he says, has been rehab. "They push you to do more than you think you can," he notes. "While it hurts initially, I find that I have my greatest flexibility and mobility immediately after my therapy session." He adds that being in therapy with others creates a motivating environment and brings out his competitive nature, which helps him push himself.

"I have seen a lot of patients in our Joint Replacement Institute," says Tatum, of his time spent over the years at St. Mary's. "Everyone wants to show you their scar or how far they walked today. I have a new appreciation for what they have been telling me," he says. "I am in awe about how some of these people in their upper 70s and 80s can rebound from this surgery." When he thinks about this accomplishment as a patient now himself, it's humbling, he says. ■

If you are suffering from chronic knee or hip pain, talk with your doctor to see if joint replacement may be an option for you. To learn more about the Joint Replacement Institute at St. Mary's, visit www.stmarysregional.com/joint.



The Joint Replacement Institute at St. Mary's Regional Medical Center

> Setting the standard for joint *replacement*

The Joint Replacement Institute offers:

- A designated Joint Replacement Institute for total joint replacement
- Standardized protocols
- A dedicated orthopedic team
- Pre-operative joint replacement educational classes
- Advanced Certification for Total Hip and Total Knee Replacement from The Joint Commission
- Extensive inpatient and outpatient rehabilitation

Introducing the new Cancer



David Lam, MD



Todd Kliewer, MD

Earlier this year, St. Mary's Regional Medical Center announced the opening of a Cancer Center on the second floor of the hospital campus to provide outpatient care and treatment here in the community. Services include: diagnosis and consultation; medical oncology and hematology; personalized treatment plans; and infusions, transfusions and chemotherapy.



The staff members at the Cancer Center provide a secure and supportive place for patients to receive vital cancer treatment.

Treatment is overseen by Hematology and Medical Oncology Physicians David Lam, MD, and Todd Kliewer, MD, who are supported by a caring, skilled staff. Extra care is taken to provide a comforting environment and connect patients with community

resources that can help them in their journey, says Weslie White, RN, Director of Oncology Services. "The support provided at St. Mary's is not just about the medicine, but everything that goes with a cancer diagnosis," she says.

For more information, contact St. Mary's Cancer Center at 580-249-5504 or visit www.stmarysregional.com/cancercenter.

A smooth transition to the Cancer Center "I just feel comfortable here"



Stepanski (right) spends time with Betty Collingsworth, RN, during a visit to the Cancer Center.

Gwenn Stepanski, who lives in Woodward, Okla., was diagnosed with breast cancer nearly five years ago. Since then she's experienced cancer in her liver, lungs, abdomen, stomach and sternum, which has resulted in 12 different types of chemotherapy. Stepanski drives an hour and a half every other week to Enid for her treatment.

After her Oncologist, Francisco Dexeus, MD, retired at the end of last year and St. Mary's opened its new Cancer Center, Stepanski says St. Mary's seemed like the best place for her to continue her treatment. "All of my radiology procedures and scans had been done here so it just made sense," she says. She also felt comfortable with the oncology nurses, many of whom had come to St. Mary's from Dr. Dexeus' office.

Stepanski started seeing St. Mary's Medical Oncologist Todd Kliewer, MD. "From the first time I met Dr. Kliewer, I liked him," she says. "I just feel comfortable here."

Center at St. Mary's



Treating melanoma: *The importance of early detection*



David W. Shepherd, MD

"You never think it could happen to you," says Sondra Diel, of her unexpected skin cancer diagnosis. Like many people, she used to enjoy tanning, and she didn't pay much attention to a mole she had on her leg, except when her family "nudged" her to have it looked at. Her daughter, Kayla, works as a nail technician in her salon and would remind her mom about it when she was giving her a pedicure.

Diel then noticed that the mole started to change in shape and color. She showed it to a friend who works for St. Mary's Physician Associates, and her friend immediately referred her to David W. Shepherd, MD, a surgeon on staff at St. Mary's.

Upon examination, Dr. Shepherd was concerned by the mole's irregular borders, and he helped set up an appointment to have it removed days later in an outpatient procedure. Testing revealed that it was melanoma, a type of skin cancer that can spread to other parts of the body if it is not diagnosed early. "I burst into tears," says Diel, thinking about her family and all the milestones yet to come. Dr. Shepherd helped her understand her diagnosis and how they would take care of it. "If melanoma is caught in the early stages, it is treatable," he says.

Anxious to get it taken care of, Diel had a second surgery, followed by more testing including a CT scan and PET scan to determine the next steps. She is now seen regularly by a dermatologist and medical oncologist "to keep an eye on it," she notes.

"I was very lucky," says Diel, grateful to her friend for referring her to Dr. Shepherd and her family, who supported her every step of the way. She notes that it was an emotional experience, and the team at St. Mary's reassured her throughout the process. "They were amazing, all of them," she says.

Self skin checks and exams by your doctor can help find cancers earlier, when they are easier to treat. To find a doctor for yourself or your family, contact our free physician referral service by calling Direct Doctors Plus® at 580-249-3741.

ASK THE **doctor**

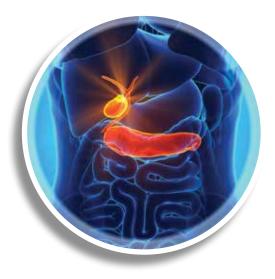
Could that pain in your abdomen be your **gallbladder?**



Problems with the gallbladder are often mistaken for indigestion,

but they are very different and can lead to potentially serious medical issues if left untreated. To shed some light on this topic,

M. Craig Bozeman, MD, FACS, a General Surgeon with St. Mary's Physician Associates, discusses the gallbladder and how treatment has evolved.



Q: What is the gallbladder, and do we need it?

The gallbladder is a thin-walled sac that sits on the right side of your abdomen. It is basically a storage organ for substances made in the liver, primarily bile. Bile can help with digestion, especially for fatty foods. You do not need the gallbladder. If it is removed, bile goes directly to the small intestine to support digestion.

Q: What are symptoms of gallbladder problems?

Symptoms may include a sensation of bloating or abdominal pain, especially after eating fried or greasy foods. Often, people don't have symptoms until they have gallstones, which are hardened particles that can form in the gallbladder. While gallstones sometimes go unnoticed, they can potentially lead to a gallbladder attack, which happens when gallstones block the bile ducts that lead to the small intestine. This is a painful condition that usually follows a heavy meal.

Q: How are gallbladder problems treated?

Generally, the recommended treatment is to remove the gallbladder. In the past, this required a two- to three-day hospital stay and four to six weeks of recovery, but now it can be done laparoscopically (minimally invasively) in an outpatient procedure. It usually requires just four little incisions and an average of five to seven days for recovery. We perform this procedure frequently at St. Mary's.

Q: Who is most at risk?

Problems with the gallbladder can affect different people but are more prevalent among women in their early 40s and the American Indian population. It's important to talk with your doctor right away if you're having symptoms. Getting timely care can help to avoid potential complications later on.

Individual results may vary. There are risks associated with any surgical procedure. Talk with your doctor about these risks to find out if minimally invasive surgery is right for you.

To find a doctor for yourself or your family, call our free physician referral service Direct Doctors Plus[®] at 580-249-3741.

What you should know about *seizures and epilepsy*



Inhyup Kim, MD

When people think of seizures, they think of dramatic or convulsive episodes, but seizures can take many forms, notes Inhyup Kim, MD, a boardcertified Neurology Specialist with St. Mary's Physician Associates. In many instances, a seizure may resemble a staring

spell, where a person becomes unresponsive for a brief time, then comes back to normal. Other symptoms may include dizziness, confusion, nausea and emotional changes.

"It is critical to see a doctor if someone has a seizure," Dr. Kim says. A doctor can perform an evaluation using tests such as an EEG (electroencephalogram), which measures and records the electrical activity of the brain. This can help determine if there is a brain abnormality that should be treated in order to prevent future seizures.

While some people may have just one seizure in their lifetime, the National Institutes of Health (NIH) states that the risk of having more seizures "increases significantly" after the second unprovoked seizure. If a person has two or more seizures, it is considered epilepsy, says Dr. Kim. With medication, the majority of patients who have epilepsy can become seizure-free, Dr. Kim says. If medication is not effective, patients may be candidates for vagus nerve stimulation. This involves surgically implanting a device that sends electrical signals to the brain to help control seizures. Another recommended treatment may be brain surgery.

In accordance with state law, patients with epilepsy must meet specific requirements to qualify for a driver's license, such as being seizure-free for a certain period of time. Following driving laws and getting treatment are essential to avoid potential injury and enjoy the best quality of life, Dr. Kim says.

To find a doctor for yourself or your family, contact our FREE Direct Doctors Plus® physician referral service at 580-249-3741.

Who's most at risk?

Epilepsy is most commonly diagnosed in children and older adults. For kids, it is often a condition they are born with, although it is not necessarily genetic, Dr. Kim says. For older patients, there may be a variety of causes, such as stroke, head injury, neurodegenerative disorders and others.

Especially with seniors, the signs of seizures can sometimes be missed or mistaken for the effects of aging. If you have any concerns, contact your doctor right away.

Before you eat or drink that ... How might it affect your medication?

"It's always a good idea to double check with your doctor about any possible food-drug interactions, especially if you're starting a new medication," says Jessica Easterwood, **PharmD**, **Pharmacy Director** at St. Mary's Regional **Medical Center. Sometimes** the things you eat or drink may impact the effectiveness of your medication or cause potential side effects. (See table.) Your doctor can advise you about the specific medicines you are taking.

Remember that you can find helpful drug information attached to your pharmacy bag, Easterwood notes. Also, don't be shy about using the counseling window at the pharmacy, she adds.

Examples of possible food-drug interactions*

Caffeine

Many foods and drinks with caffeine also contain tyramine, an amino acid which, at high levels, can cause a sudden, dangerous increase in blood pressure. Caffeine can also potentially cause side effects, such as rapid heart beat, with certain drugs.

Alcohol

Alcohol can increase the chance of dangerous side effects, even death, if combined with narcotics such as opioids. It can also add to the side effects, such as drowsiness, of some medications, and can increase the chance of liver damage when consumed with certain drugs.

Food

Some medications, such as drugs for osteoporosis, work only when taken on an empty stomach. Other drugs, such as warfarin, a blood-thinning medication, can be affected by the foods you eat. For example, Vitamin K in foods like broccoli, cabbage and others can make warfarin less effective.**

Supplements

Vitamins and other dietary supplements can affect how your medicines work. For example, glucosamine, ginseng and ginkgo can increase the chance of bleeding when taken with warfarin.

*This and other information can be found in "Avoid Food-Drug Interactions, A Guide from the National Consumers League and U.S. Food and Drug Administration." **Talk with your doctor before changing your diet.

To find a doctor for yourself or your family, call our free Direct Doctors Plus® physician referral service at 580-249-3741.

Poison prevention tips

Every day, more than 300 children in the United States ages 0 to 19 are treated in an emergency department, and two children die, as a result of being poisoned, according to the Centers for Disease Control and Prevention (CDC). Chemicals, as well as everyday items like household cleaners and medicines, can present serious dangers for kids, who may mistake them for food or try eating them out of curiosity. Here are tips from the CDC to help keep your family safe.



Lock dangerous products up and away.

Keep medicines and toxic products, such cleaning solutions and detergent pods, in their original packaging where children can't see or get them.



Read the label.

Follow label directions carefully and read all warnings especially when giving medicines to children.



Don't keep it if you don't need it.

Safely dispose of unused, unneeded, or expired prescription drugs and over the counter drugs, vitamins, and supplements. To dispose of medicines, mix them with coffee grounds or kitty litter and throw them away. You can also turn them in at a local take-back program or during National Drug Take-Back events.



Know the number.

Put the nationwide poison control center phone number, 1-800-222-1222, on or near every telephone in your home and program it into your cell phone. Call the poison control center if you think a child has been poisoned but they are awake and alert; they can be reached 24 hours a day, seven days a week. Call 911 if you have a poison emergency and your child has collapsed or is not breathing.

Did you know?

According to the American Academy of Pediatrics (AAP), most poisonings occur when parents or caregivers are home but not paying attention. The AAP advises parents to be especially vigilant during holidays or changes in routine, when the usual safeguards may not be in place and children may be at greater risk of getting into dangerous products or medicines. Among other safety tips, the AAP says to never describe medicine as "candy." Also, beware that safety latches on cupboards and drawers can sometimes malfunction, so the best place to store poisonous products is out of sight and out of reach of children.



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- Emergency Services Level III Trauma Center
- **Neurosurgery** Image-guided surgery for brain and spine procedures
- Stroke Advanced Certified Primary Stroke Center



- Cardiovascular Services Fully digital cardiac catheterization lab
- Orthopedics Joint Replacement Institute, sports medicine and trauma services; first facility in Oklahoma to receive Advanced Certification for Total Hip and Total Knee Replacement
- Wound Care and Hyperbaric Medicine -Hyperbaric oxygen therapy

- Women's Services Women's Imaging Center, OB GYN services
- Rehabilitation Institute CARF accreditation for adult comprehensive inpatient rehabilitation with adult inpatient brain injury program and specialization in stroke care
- Sleep Disorders Center Diagnosis and treatment of obstructive sleep apnea and narcolepsy
- Cancer Center Outpatient chemotherapy, medical oncology/hematology, diagnosis and consultation

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