

Life & Health

EXCELLENCE IN COMMUNITY HEALTH • FALL 2011

Health Link

CLEAR UP CATARACTS

Do you have cloudy or blurry vision, poor night vision, or double vision? Do headlights seem to shine too brightly? These are common symptoms of cataracts. Talk to an eye doctor to find out if you have a cataract.

National Eye Institute



GO NUTS! Looking for a healthy snack? Try a handful of walnuts, almonds or peanuts. They can give you an energy boost, and they may help reduce your risk of heart disease and diabetes.

American Dietetic Association

SPREAD THE WORD

Two secrets of people who've lost 30 or more pounds and kept them off for at least a year: 90 percent exercise for about an hour every day, and 62 percent watch less than 10 hours of TV per week.

National Weight Control Registry

How we help prevent infections

Bacteria and viruses that cause infections—such as pneumonia, colds or strep throat—threaten people outside of the hospital every day. ♦ But when you're in the hospital, you may be at a higher-than-normal risk for some infections. Your immune system may be weakened by illness or certain treatments. In addition, other people in the hospital may carry dangerous germs.

That's why the risk of health care-associated infections (HAIs)—infections acquired in a health care setting—is a serious concern. Five percent of patients hospitalized in the U.S. each year get an HAI, estimates the Centers for Disease Control and Prevention.

The goal is for all patients to stay infection-free. So we take special steps to prevent infections from spreading.

PREVENTIVE MEASURES To limit the risk of infection, our doctors and nurses wash their hands before and after caring for each patient, and special care is taken to keep rooms and equipment clean and sterile.

To prevent HAIs during surgery, our hospital staff members also:

- Thoroughly clean their hands and arms up to their elbows just before surgery.
- Wear special hair covers, masks, gowns and gloves.
- Use electric clippers (not a razor) to remove hair from patients before surgery.
- Give patients antibiotics about an hour before surgery starts.
- Thoroughly clean a patient's skin at the surgery



site with special germ-killing soap.

If a person already has an infection, our hospital may:

- When possible, keep the patient from sharing a room, except with another infected person.
- Ask caregivers and visitors to wear gowns and gloves when with the patient.

While prevention is our priority, we strive to provide the best possible treatment and care for all infections—regardless of whether an infection was acquired in the hospital or elsewhere.

Visiting guide

When you're visiting someone in the hospital, consider bringing along get-well wishes and cheerful stories. But leave the germs outside.

People in the hospital can be vulnerable to infection, so it's important that visitors take thoughtful precautions. Here are some tips for visitors from the Association for Professionals in Infection Control and Epidemiology:

- Stay home if you're sick or have had symptoms of illness within the last three days.
- Check with hospital staff before bringing food, flowers or children to the patient's room.
- Read and follow any instructions posted outside the patient's room.
- Do not sit on the patient's bed or handle hospital equipment.
- To help prevent carrying germs into or out of the room, wash your hands with soap and water or use hand sanitizer before and after visiting. Also wash your hands if you use the bathroom, eat or drink, sneeze, cough, or touch your nose or mouth while visiting.

Our doctors and nurses are careful to wash their hands before and after caring for each patient.



OCTOBER: A GOOD TIME TO CONSIDER BREAST HEALTH

Options if you're at high risk

If your family tree plants you in a high-risk pool for breast or ovarian cancer, there are steps that may lower your risk. Your doctor may discuss:

Extra screening. This approach doesn't change the risk of getting cancer. But it may help find cancer early, when treatment is most likely to be successful. Some women at high risk for breast cancer are advised to start mammograms earlier and have them more often than women who are at average risk for the disease. Doctors also may recommend screening with magnetic resonance imaging (MRI) in addition to mammograms.

Prophylactic surgery. Some women decide to have their healthy breasts or healthy ovaries and fallopian tubes removed in the hopes of preventing breast or ovarian cancer. Although this significantly lowers the risk of developing these cancers, it doesn't eliminate it.

Chemoprevention. This involves taking prescription medicine to decrease the risk of getting breast cancer. The drugs help lower the risk for the disease by about 50 percent.

Suggestions for everyone

Research suggests that healthy lifestyle choices can help prevent many cancers, including some breast and ovarian cancers.

According to the American Cancer Society, all women—regardless of their family history of cancer—should: ■ Not smoke. ■ Achieve, and stay at, a healthy weight throughout life. ■ Eat five or more servings of vegetables and fruits a day. ■ Choose whole grains over processed grains. ■ Limit the consumption of processed meats (such as lunch meats) and red meat. ■ Exercise at least 30 minutes a day, five days a week.

AS OF YET, there is no sure way to prevent breast cancer, the second leading cause of cancer deaths among women in this country. Even so, there are clear steps women can take to reduce their risk. And October, which is nationally recognized as Breast Cancer Awareness Month, is the ideal time to take them.

One key safeguard is for women to maintain a healthy weight, especially in midlife and later. After menopause, most of the hormone estrogen in a woman's body comes from fat cells. Estrogen can spur the growth of many breast tumors, and being overweight or obese can raise breast cancer risk. Women may be especially vulnerable to breast cancer if extra pounds settle on their waist, rather than their hips and thighs.

These additional steps may help women reduce their risk for breast cancer, according to the American Cancer Society (ACS):

- Avoid alcohol. Drinking is clearly tied to a heightened risk of developing breast cancer. In fact, your risk increases the more you drink.
- Be active. A growing body of research indicates that exercise lowers breast cancer risk. Aim for 45 to 60 minutes of exercise at least five days a week.

Since breast cancer can develop even with these precautions, the ACS advises women to have yearly mammograms starting at age 40 and continuing for as long as they are in good health. Regular mammograms can detect cancer in its early stages.



OCTOBER IS NATIONAL BREAST CANCER AWARENESS MONTH



Last year in Tillamook, mammograms for 50 patients—both women and men—showed the possibility of breast cancer. Of these, 25 were diagnosed with the disease.

Patient assistance through the Tillamook Breast Health Coalition, a partnership of local community health-focused groups and individuals, helped support these 25 new cancer patients through their treatment and recovery. Funding for patient navigation services comes from the Susan G. Komen for the Cure Foundation, as well as fundraising events by the Coalition. Breast Health events in October include:

Mammography Spa Day at TCGH

Wednesday, Oct. 12

After your mammogram, enjoy a free, rejuvenating, 10-minute neck and shoulder massage along with tea and chocolates in a soothing spa-like atmosphere. This special promotion is available for women age 40 and older whose most recent mammogram was more than a year ago, who have no history of breast cancer in the past two years and who have no current symptoms. To schedule an appointment, call **503-815-2292**.



Expressions of Hope

Art Space, Bay City

■ **Exhibit: Saturday Oct. 15, 9 a.m. to 4 p.m.**

■ **Silent auction and art sale: Sunday, Oct. 16, 9 a.m. to 2 p.m.**

Sponsored by the Samuel S. Johnson Foundation.

■ **Reception: Sunday, Oct. 16, 2 to 4 p.m.**

Sponsored by Bank of Astoria/Manzanita Branch

"Similar to last year's decoration contest, this year we are asking members of our community to decorate themed hats," says Breast Health Coordinator Suzie Whalen. "Hats become an important part of many breast cancer survivors' wardrobes, as one of the side effects of chemo treatments is hair loss."

For more information about Expressions of Hope events, please call Whalen at **503-368-5182, ext. 111**.



RESOURCES IN TILLAMOOK

YOU DON'T HAVE to face the challenges of diabetes alone. Tillamook County General Hospital has support and education programs designed to help people with diabetes enjoy the best health possible.

Programs include:

- “Diabetes & All That Jazz,” a free monthly support group that features a short presentation on a diabetes-related topic.
- “Living Better With Diabetes,” a four-session class providing in-depth information about diabetes.
- “Diabetes & You,” a free one-day seminar highlighting new developments in diabetes care and prevention.

The hospital also offers, at no charge, presentations to the community about diabetes, its risks and ways to prevent it. To schedule a presentation to your group or to get involved with one of our programs, call Sue Phillips-Meyer, our Diabetes Program Coordinator, at 503-815-2443.



“Diabetes & You” Annual Seminar

**Tuesday, Nov. 8
10 a.m. to 3 p.m.
Tillamook Seventh-day Adventist
Church, lower level**

This event features informative presentations about living with diabetes from community and hospital medical professionals. A delicious



heart-healthy lunch is included. For more information or to register, call **503-815-2313**.



John Bohlman, MD

Presenters include:

- Ginny Gabel, RN, TCGH Community Health Education
- John Zimmerman, MD, Tillamook Health Department
- Eric Halperin, OD, Tillamook Vision Center
- John Bohlman, MD, Tillamook Medical Group
- Susan Phillips-Meyer, Diabetes Education Coordinator



Susan Phillips-Meyer, RD, LD, RN



Ginny Gabel, RN

DIABETES

JUST DIAGNOSED? START HERE

IF YOU'VE JUST LEARNED you have type 2 diabetes, it's normal to have mixed emotions. You may feel angry about having the disease. You may feel relieved to have a diagnosis—and a plan. You might also think, “Why me?”

The disease results from a complicated interplay between genetics and lifestyle. Scientists don't fully understand why some people get it and others don't. But they do know that there are ways to reduce the risk for the serious complications associated with diabetes.

So, now that diabetes has been diagnosed, it's time to look forward. Ask yourself: What can I do now to control this disease? According to the American Diabetes Association, you should:

Create a meal plan—and stick to it. Your doctor or dietitian will help you adjust your diet to meet your blood sugar (glucose) goals. You can probably expect to:

- Count carbohydrates, which raise blood sugar the most.
- Eat less salt and saturated fats.
- Get more fiber, which can be found in fruits, vegetables, beans and whole grains.

Exercise most days of the week. Physical activity helps keep your blood sugar and blood pressure under control—and it even helps insulin work better. If you're not in the habit of being active, start small and spread your exercise out over the day. You could:

- Walk around when you're on the phone.
- Park your car a block or two away and walk the rest

of the way to your destination.

- Take the stairs instead of the elevator or escalator.
- Do some gardening or yard work.
- Try to work up to at least 30 minutes of aerobic activity a day, five days a week. And aim to do some strength training and stretching too. Work with your doctor to create an exercise plan that suits you.

Know your blood glucose level. Medications, a healthy diet and regular exercise can help control your blood sugar. But you need feedback to make sure these interventions are working. That's why it's important to monitor your blood sugar as directed by your doctor.

**For more information about
diabetes classes and events, see
the calendar on the back page.**

He or she will help you determine your target glucose level and how often you should check it with your home glucose monitor. Many people test several times a day. Record the results to share with your doctor.

You should also have an A1C test at least twice a year. It tests average blood glucose levels over time.

Managing blood sugar isn't always easy—but it's worth it. If you stick with it, you'll have more energy, feel less tired and avoid many of the health problems associated with uncontrolled diabetes.

Kids with diabetes: Help them thrive

A diagnosis of diabetes doesn't set a limit on your child. With good blood sugar control, he or she can still eat favorite foods, play sports and achieve big dreams.

You can give your child the necessary tools to manage diabetes successfully.

The following suggestions from the American Diabetes Association and the American Academy of Pediatrics are a good place to start:

- Offer healthy foods. Like any growing kid, your son or daughter needs a nutritious diet, including plenty of whole grains and fresh fruits and vegetables.
- Let your child have some control. Age-appropriate diabetes self-care is important. Very young children can choose which finger to stick, for example. Older kids can use blood glucose meters.
- Always keep supplies handy. Those include glucose tablets and glucagon kits.
- Inform your child's school or

- day care. Those who take care of your child should know his or her insulin schedule and snack needs—as well as how to give insulin and test blood sugar and urine ketones.
- Remember the emotional aspect of diabetes. The diagnosis can mean a big change in your family's daily lifestyle. It's important to get support and learn healthy ways to cope with stress.
- Work closely with your child's doctor. Ask questions, and learn as much as you can about your child's diabetes.

MINUTES MATTER IN A HEART ATTACK



Watchful waiting can be a smart strategy in certain medical matters. A heart attack isn't one of them. In fact, it's just the opposite. When heart attack symptoms appear, fast action is required.

Why the need for speed? Because every second without treatment means more damage to the heart muscle.

A heart attack occurs when the blood supply to the heart is cut off. That's often caused by a sudden clot forming in a narrowed coronary artery.

Without nutrients and oxygen, the area of the heart affected starts to die. If a large enough section is weakened, the heart can't pump blood as effectively as it should. That can lead to heart failure or even death.

Treatments that can restore blood flow and stop a heart attack are available, but they must be given soon after symptoms start—ideally within an hour of the first sign of trouble.

That's why it's crucial for you to recognize the signs of a heart attack and to act fast when they occur.

HEED THE SYMPTOMS According to the National Heart, Lung, and Blood Institute, warning signs include:

- Discomfort in the center of the chest. This is the most common symptom of a heart attack. It can feel like pressure, squeezing, fullness or pain that lasts more than a few minutes.
- Upper body discomfort, such as pain in one or both arms, the back, neck, jaw, or stomach.
- Shortness of breath. This may occur with or before chest discomfort.
- Breaking out in a cold sweat or feeling nauseated or light-headed.

Not everyone has every symptom of a heart attack, and symptoms may come and go.

If you think you or someone else is having a heart

attack, wait no more than five minutes to call 911. Even if you're not sure it's a heart attack, be safe and let a doctor decide what's wrong.

GARY ALBRIGHT'S STORY When Gary Albright started feeling light-headed and sweaty one morning, he wasn't too concerned.

After all, the 61-year-old director of the Tillamook County Pioneer Museum thought he was in good health. He had maintained a healthy weight for more than a decade and had no family history of heart problems.

So when the feeling passed after a few minutes, he went off to work.

Later, the same feeling returned, this time with chest pains and shortness of breath. That's when Albright realized he was having a heart attack and needed emergency services quickly.

At Tillamook County General Hospital, the Emergency Department activated the heart attack treatment protocols. Albright was "hot-loaded" into a medical helicopter and flown to Adventist Medical Center's Northwest Regional Heart Center, where cardiologist Brad Titus, MD, and the cardiology care team rushed him to surgery.

Dr. Titus placed an Impella—a tiny heart pump about the diameter of a drinking straw—in Albright. The Impella kept Albright's heart beating while the Heart Center team inserted a stent that opened his coronary arteries and got blood flowing again.

Albright was discharged from the hospital just 48 hours after the procedure. But he knows how close he came.

"I was dying," Albright says. "I'm so grateful for the exceptional staff at both hospitals and the cutting-edge technology that saved my life."

Mark Hart, MD, a cardiologist who sees patients at Tillamook Medical Group, praised Albright for recognizing his symptoms and knowing he needed to get help quickly.

"Half of all people having a heart attack wait more

than two hours before getting help, and by then it can be too late," Dr. Hart says. "Because of Tillamook Hospital's affiliation with the Northwest Regional Heart Center, calling 911 and getting to the hospital right away can save precious minutes needed for our two health care teams to save your life."

It's important: Learn and act on the signs of stroke

When someone is having a stroke, getting prompt medical treatment can make the difference between life and death. But would you know if you were having a stroke?

Unfortunately, many people don't recognize the warning signs of stroke and don't get timely help.

It is especially important for women to know the symptoms of a stroke because they account for about 60 percent of stroke deaths, according to the American Stroke Association (ASA).

That's why the American Academy of Neurology, the American College of Emergency Physicians and the ASA came up with the Give Me 5 campaign. It's an easy-to-remember checklist to help you identify stroke symptoms.

Call 911 immediately if you can answer yes to any of the following questions about yourself or someone else:

- 1 **Walk.** Are you having trouble walking? Is your balance off?
- 2 **Talk.** Are you having trouble speaking? Is your speech slurred or face droopy?
- 3 **Reach.** Are you numb or weak on one side of your body?
- 4 **See.** Are you having trouble seeing? Is your vision all or partly gone?
- 5 **Feel.** Do you have a severe headache with no known cause?

Stroke is a medical emergency. Every minute counts when someone is having a stroke. The longer the brain is deprived of blood, the greater the damage.

IN CASE OF EMERGENCY

A guide to what you can expect in the emergency department

A HOSPITAL EMERGENCY DEPARTMENT

probably isn't on your top 10 list of travel destinations, but at some point in your life, an injury or illness will most likely land you or someone you love in one.

Knowing what to expect can help you be prepared and make your visit less stressful, according to the American College of Emergency Physicians (ACEP).

IS IT AN EMERGENCY? Not every illness or injury requires a trip to the emergency department. Some less serious medical problems can be treated by your primary care doctor or at an urgent care center.

But there are some conditions that require instant attention and an immediate trip to the hospital. Some common signs and symptoms of an emergency include:

- Chest pain or upper abdominal pain or pressure that lasts two minutes or more.
- Sudden changes in vision.
- Uncontrolled bleeding.
- Sudden or severe pain.
- Difficulty breathing or speaking.
- Sudden dizziness or weakness.
- Severe or persistent vomiting or diarrhea.
- Coughing or vomiting blood.
- Suicidal or homicidal feelings.

WHAT TO EXPECT If you are unconscious or come to the emergency department by ambulance, you will be treated right away, according to ACEP.

Otherwise, if you walk into the emergency department, you will most likely be seen by a triage nurse. He or she

will examine you and check your vital signs to determine if you need to be treated immediately. And if you do need fast treatment, you'll be assigned to a bed in the treatment area.

It's a good idea to have health insurance information with you. You should also be prepared to tell the nurse about your medical history, any medications you are taking and any allergies you have.

You may have to spend some time in the waiting room if your condition is not considered a threat to your life or limbs. Emergency departments do not operate on a first-come, first-served basis. Patients with critical injuries or illnesses are always given top priority. While waiting, if your condition or pain gets worse, it's important to tell the nurse.

Emergency department doctors are committed to providing high-quality care as quickly as possible. But the department is normally a busy place, and it may take some time for a doctor to see you if your condition is not critical.

WHEN KIDS NEED EMERGENCY CARE Taking your child to the emergency department can be a stressful experience. But if you're prepared and in control, you can help make things less stressful—for both you and your child.

To prepare for an emergency, talk to your child's doctor in advance about the signs of a true emergency. Ask questions about what you should do if your child is seriously ill or injured.

The American College of Emergency Physicians offers these tips for taking a child to the emergency department:

- Know where the nearest emergency department is located and how to get there. If it's a critical situation, call 911. If it is safe to drive, go to the hospital right away.
- Tell the emergency department staff exactly what is wrong with your child.
- If possible, bring a list of your child's allergies and

medications, as well as his or her immunization records and contact information for your child's doctor.

- Be open and honest with your child. Tell him or her what is happening and that the hospital staff is there to help.
- Don't let your child eat or drink anything on the way to the hospital.

Above all, do your best to stay calm—for your child's sake. If you are impatient and panicked, your child is likely to act the same way.



Join the T*E*A*M

When you call 911 for a medical emergency, the last thing on your mind should be how much your out-of-pocket expenses might be for ambulance services.

Joining the Tillamook Emergency Ambulance Membership (T*E*A*M) program can help answer that question in advance. For about 16 cents a day, T*E*A*M members enjoy reduced out-of-pocket expenses for ambulance services. Members covered by insurance will see insurance payments accepted as payment in full. Members without insurance have their bill reduced by 20 percent.

Transports from one medical facility to another are also covered by the T*E*A*M program, when deemed medically necessary and pre-approved. In addition, T*E*A*M's partnership with FireMed enables it to offer the same coverage in many other parts of Oregon as in Tillamook County.

For \$60—about the cost of a gift basket—you can give a year's membership in T*E*A*M to a friend or family member. You can also make a tax-deductible donation when you apply for T*E*A*M membership that will help support high-quality ambulance service in Tillamook County.

For more information, go to www.tcgh.com or call 503-815-2257.

Tillamook Hospital's ambulance crews provide emergency medical services around the clock to all of Tillamook County. Generous contributions and T*E*A*M memberships help support the purchase and maintenance of equipment such as this new ambulance, as well as the training to meet community needs.

**Our emergency staff members are here to help 24/7.
For medical emergencies, call 911.**



ELECTRONIC MEDICAL RECORDS

MYCHART LETS YOU SEE RECORDS ONLINE

TILLAMOOK MEDICAL GROUP (TMG) patients now have personalized, secure online access to portions of their medical records. Using OCHIN MyChart, patients can securely use the internet to:

- Request medical appointments.
- View the health summary from their MyChart electronic health record.
- View test results.
- Request prescription renewals.
- Access trusted health information resources.
- Communicate electronically and securely with their medical care team.

Patients who wish to use MyChart will receive an activation code during their clinic visit that can be used to log in and create a user ID and password. For security, access codes expire after 60 days and are no longer valid after the first use.

“Our patients are going to find this secure, online access with MyChart very convenient for accessing their personal health information 24/7,” says Brandon



Brandon Mitchell, DC, MD

Mitchell, DC, MD, a Family Medicine physician at TMG. “And this gives our clinic medical providers a new way to communicate with our patients, some of whom are very electronically connected.”

Here are some frequently asked questions and answers about MyChart:

Q When can I see my test results in MyChart?

▲▼ Test results are released to your MyChart account within four days of receipt from the testing laboratory. Not all test results are released to MyChart. For more information, please ask your provider.

Q If some of my health information on MyChart is not correct, what should I do?

▲▼ MyChart information comes directly from the electronic medical record at your provider’s office. Your health information is reviewed and updated in your electronic medical record each visit.

Q If I send a message to my provider or medical assistant, when can I expect a reply?

▲▼ An answer will generally be received back within three business days. MyChart should not be used for

urgent situations. Please contact your provider if the situation requires immediate attention or dial 911 if it is an emergency.

Q How is MyChart secure?

▲▼ Great care has been taken to ensure that MyChart health information is kept private and secure. Access to information is controlled through secure access codes, personal IDs, and passwords. Each person controls their password and the account cannot be accessed without that password. Further, MyChart uses the latest 128-bit SSL encryption technology with no caching to automatically encrypt your session with MyChart. Unlike conventional email, all MyChart messaging is done while the patient is securely logged in to the OCHIN MyChart website.

To read this privacy policy, click on “Privacy Policy” at <https://mychart.ochin.org>.

Q What do I need to use MyChart?

▲▼ Once you have a MyChart activation code, all you need is access to a computer, the Internet and an up-to-date browser.

For sign-up assistance and more information about MyChart, call 503-842-5546.

Welcome, Dr. Barhaghi



Michelle Barhaghi, MD

Tillamook County General Hospital welcomes Michelle Barhaghi, MD, to practice obstetrics and gynecology with Women’s & Family Services at Tillamook Medical Group.

Dr. Barhaghi graduated from Mount Sinai School of Medicine in New York City and completed residency training in obstetrics and gynecology at Tulane University in New Orleans.

She later worked at hospitals in New Zealand and South Africa as their equivalent of an attending physician.

In working with patients, Dr. Barhaghi seeks to improve their quality of life using minimally invasive approaches that have them back to their normal routines as quickly as possible.

“I am very pleased to welcome Dr. Barhaghi to Tillamook,” says Brittany Gerken, MD, an OB/GYN. “She and I will be working closely together to expand the number of women’s care services, especially in gynecology, that we can provide right here in Tillamook to meet the needs of our residents.”

To schedule an appointment with Michelle Barhaghi, MD, at Women’s & Family Services at Tillamook Medical Group, call 503-842-5546.



OPTIONS FOR HEAVY PERIODS

IT’S NOT UNCOMMON.

About one-third of women experience heavy menstrual bleeding, or menorrhagia, at some point in their lives. In milder cases, daily activities may be limited due to heavy bleeding cycles. Severe cases can result in anemia and may even require blood transfusions.

A normal amount of monthly blood loss is less than three ounces. With abnormally heavy periods, typical symptoms include soaking through a pad or a tampon every one to two hours on the heaviest days of the cycle, passing blood clots larger than an inch or having a cycle length that lasts longer than seven days.

Causes include bleeding disorders, hormonal imbalances or abnormal growths within the uterus such as noncancerous fibroid tumors and uterine polyps. Sometimes heavy menstrual bleeding can also be a symptom of a cancerous process, especially in women over 45. This makes it especially important to make an appointment with a health care provider for further evaluation.

The good news is that several therapeutic options allow

for quick and easy treatment.

Once a provider has ruled out more serious causes of heavy bleeding—and if fertility is no longer desired—many women find that an endometrial ablation provides excellent results. In this procedure, the inner lining of the uterus is removed, resulting in little to no menstrual bleeding during subsequent cycles. A cervical approach is taken so no incisions are needed. The ablation procedure takes about 90 seconds. Most women can go home within a couple of hours after completion and are able to resume their normal activities the next day.

Other options, particularly for those wanting future fertility, include hormonal supplements in the form of a daily pill, a weekly patch, a monthly ring, an injection every three months, a three-year implant, or an intrauterine device (IUD) that can last up to five years. All of the above options can be discontinued when fertility is desired.

If you are experiencing heavy menstrual bleeding, talk to your doctor about treatment options and get back to living your life more fully—all month long.



HOSPICE

COMPASSIONATE CARE FOR THE END OF LIFE

WHEN THE END OF LIFE is near, hospice care can help terminally ill people live their remaining days with dignity.

Hospice services provide support to a person with a terminal illness who has less than six months to live.

With the help of hospice, a dying person can often remain at home, close to family and loved ones, throughout the dying process. During this time, members of the hospice team work to keep the patient as pain-free, symptom-free and comfortable as possible.

According to the U.S. Department of Health and Human Services, a hospice team can include professionals and support members such as:

- Doctors and nurses.
- Social workers.
- Counselors.
- Chaplains, pastors or other clergy members.
- Home health aides.
- Trained volunteers.

The hospice team can provide physical, psychological, spiritual and social support in a person's home or at a hospice residence. And help is available from the hospice team 24 hours a day, 7 days a week.

Together, the team works with the ill person and his or her family members. The team:

- Supports the patient through the emotional and

A bequest through your will or trust could give the gift of life to others for years to come. Call us at 503-815-2302 for more information or go to www.tcgh.com.


spiritual aspects of dying.

- Sees to medical and nursing needs.
- Provides day-to-day personal care, such as bathing, dressing and preparing meals.
- Trains family members to help provide care for their loved one.
- Provides inpatient care when pain or other symptoms can't be handled at home.
- Helps family members cope before and after the death of their loved one through counseling and support.

WHO PAYS? Most private insurance plans offer at least some hospice care coverage. Medicare and Medicaid also provide hospice benefits. And even if a person doesn't

have coverage, hospice may work with the family to ensure that care can be provided.

Although hospice may be initiated when a person is not expected to live more than six months, care won't end if the person lives beyond that time. It continues as long as the doctor and hospice team certify that the person's condition is life-limiting.

You can find out more about hospice care through Caring Connections, a program from the National Hospice and Palliative Care Organization. Visit  www.caringinfo.org and click on "Living With an Illness."



Ben Douglas, MD

Ben Douglas, MD, Medical Director of the Adventist Health/Hospice team serving Tillamook County, encourages families not to wait to talk with their health care provider about making a referral for hospice services for their loved one.

"Our hospice team has so much to offer both patients and their loved ones in supporting quality of life in the final months of life," Dr. Douglas says.

Light Up A Life

Join us at noon on Monday, Nov. 21, at the Tillamook County Creamery Association (TCCA) Visitors Center for a holiday tree-lighting ceremony to kick off the annual Light Up A Life fundraising campaign!

Light Up A Life—hospice's only public fundraiser—runs through the Reading of the Names ceremony on Thursday, Jan. 5, 2012, at the TCCA Visitors Center. Those who contribute \$10 or more during this time receive a sand dollar ornament, lovingly decorated by hospice volunteers.

But more important than any ornament is the help you're giving to community members who are facing a terminal illness. Last year hospice service cared for more than 100 local patients.

You can make a donation at the hospice office or online at www.tcgh.com/giving.php. Mail checks to: Light Up A Life, 1015 Third St., Tillamook, OR 97141.



Your gifts help us to help others!



Take care of yourself

Caring for a loved one with a terminal illness is a big job. But don't let it overshadow your own very legitimate physical and emotional needs. Remember, putting in a little effort to bolster your own body and spirit will help you better care for your loved one.

According to the American Cancer Society and other experts, there are several things you can do:

- Try to maintain a healthy diet, and try to exercise at least a little bit each day. Even 15 to 30 minutes of activity can help ease the stress common to caregivers.
- Get enough rest. If you aren't sleeping well at night, try taking short naps during the day. If sleep becomes an ongoing problem, talk to your doctor.
- Consider joining a support group. It's a good way to see how others deal with issues you're facing.
- Set aside some time for fun. Connect with a friend. Work in the yard. Watch a movie. Let yourself laugh.
- Ask for help. You may find family, friends and neighbors eager to help with some of the caregiving duties.
- Keep up with your own medical checkups and screenings.



DON'T MISS THESE COMMUNITY EVENTS

All classes will be held at Tillamook County General Hospital (TCGH) unless otherwise noted. For more information, call 503-815-2270 or go to www.tcgh.com/events.

Better Health

DEPRESSION RECOVERY

■ **Registration and information session:** Tuesday, Jan. 10, 2012, 6:30 to 7:30 p.m.
 ■ **Class:** Jan. 18 through March 6, 2012, 6:30 to 8 p.m. Tillamook SDA Church
 Call 503-815-2270 to register.

LIVING BETTER WITH DIABETES

Oct. 25 to Nov. 3, 1:30 to 4 p.m. TCGH third-floor conference room A
 Referral by a health care provider is required. To schedule a one-hour nutrition counseling session before class,

call 503-815-2292. Most health insurance plans are accepted. For information, call 503-815-2443.

NORTH COUNTY PRESENTS: BREAST HEALTH
 Thursday, Oct. 20, 7 p.m. Calvary Bible Church, Manzanita
 No charge. For information, call 503-815-2370.

NORTH COUNTY PRESENTS: LUNG HEALTH
 Thursday, Nov. 10, 7 p.m. Calvary Bible Church, Manzanita
 No charge. For information, call 503-815-2370.

Prenatal Care and Women's Health

CHILDBIRTH PREPARATION CLASS

■ **Wednesdays, Oct. 26 to Nov. 16**
 ■ **Wednesdays, Jan. 4 to 25, 2012** 7 to 9 p.m.
 TCGH third-floor conference room A
 For more information, call 503-815-2313.

LOOK GOOD...FEEL BETTER
 Wednesday, Jan. 18, 2012 2 to 4 p.m.
 TCGH third-floor conference room D
 A program for women with cancer. No charge. An RSVP is required. Call 503-815-2313.

WOMEN'S CANCER SURVIVOR SUPPORT GROUP
 First Wednesday of each month
 10:30 a.m. to noon
 312 Laurel Ave., Tillamook
 Call 503-842-4508.

Respite Care

WELLSPRING ADULT RESPITE CARE
 ■ **Second and fourth Tuesdays of each month, Tillamook United Methodist Church**
 ■ **First and third Wednesdays of each month, Tillamook SDA Church**
 ■ **First and third Thursdays of each month, Covenant Community Church, Manzanita**
 ■ **Second and fourth Thursdays of each month, Beaver Community Church** 10 a.m. to 4 p.m.
 \$29 per day; financial assistance is available. Call Faith in Action at 503-815-2272.

Support Groups

ALZHEIMER'S AND CAREGIVER SUPPORT GROUP
 Third Wednesday of each month
 10:30 a.m. to noon
 Tillamook SDA Church, lower level
 For information, call 503-815-2270. For respite care, call 503-815-2272.

CHIP UPPER CLUB
 Second Monday of each month
 5:45 to 8 p.m.
 Tillamook SDA Church
 To RSVP, call 503-815-2270.

DIABETES AND ALL THAT JAZZ
 Second Tuesday of each month
 1:30 to 3 p.m.
 TCGH third-floor conference rooms
 For more information, call 503-815-2443.

GRIEF SUPPORT GROUP
 ■ **Tillamook**
 First and third Tuesdays of each month
 3 to 4:30 p.m.
 TCGH third-floor conference room A
 For more information, call 503-815-2313.
 ■ **North County**
 First and third Thursdays of each month
 3 to 4:30 p.m.
 Calvary Bible Church, Manzanita
 For more information, call 503-368-6544, ext. 2313.

NORTH COAST GLUTEN-FREE SUPPORT GROUP
 First Thursday of each month
 7 to 8:30 p.m., Bay City
 Call 503-377-8227 for directions.

Wellness Screenings

BLOOD PRESSURE
 Wednesdays, 2 to 3 p.m.
 TCGH cafeteria
 No charge.

CHOLESTEROL AND BLOOD SUGAR
 ■ **Thursday, Oct. 20** 9 to 10:30 a.m.
 North Coast Home Care, Tillamook
 ■ **Thursday, Oct. 27** 8 to 10 a.m.
 NRCD in Nehalem

■ **Wednesday, Jan. 11, 2012, 7 to 9:30 a.m.**
YMCA
 Cholesterol and blood sugar screening costs \$20. A 12-hour fast is required. An appointment is recommended; call 503-815-2313.

Other Events

HOSPICE LIGHT UP A LIFE—TREE LIGHTING
 Monday, Nov. 21
 Noon

HOSPICE LIGHT UP A LIFE—READING OF NAMES
 Thursday, Jan. 5, 2012
 Noon
TCCA Visitors Center
 Raising awareness and funds for hospice care. For information, call 503-815-2486.

Flu Shot Clinics

Walk-in. Insurance and Medicare Part B accepted. Out-of-pocket cost will not exceed \$20.

TILLAMOOK MEDICAL GROUP MAIN CAMPUS
 980 Third St., Suite 200
 ■ **Monday and Tuesday, Oct. 3 and 11, 1 to 5 p.m.**
 ■ **Thursday, Oct. 13, 8 a.m. to noon**
 ■ **Monday, Nov. 7, 1 to 5 p.m.**
 ■ **Wednesday, Nov. 9, 8 a.m. to noon**

TILLAMOOK MEDICAL GROUP BAY OCEAN
 1011 Third St.
 ■ **Wednesday and Friday, Oct. 5 and 7, 8 a.m. to noon**
 ■ **Wednesday, Oct. 19, 1:30 to 5 p.m.**
 ■ **Wednesday and Friday, Nov. 2 and 4, 8 a.m. to noon**

NEED A HEALTH PARTNER?

Adventist Health/Tillamook Medical Group

Cardiology

Ronald Chelsky, MD
 Mark V. Hart, MD
Family Medicine
 Shirley Arneson, ANP
 Ann Batchelder, ND, FNP
 David Bradburn, MD
 Teresa Callahan, MD
 Ben Douglas, MD
 Irene Martin, MD
 Karl Meier, MD
 Brandon Mitchell, DC, MD
 Glen Saylor, MD
 Rob Soans, PA

General Surgery

Todd Pitts, MD
Internal Medicine
 Calvin Hill, MD
 John Bohlman, MD
Obstetrics and Gynecology
 Brittany Gerken, MD
 Michelle Barhaghi, MD
Oncology
 Gerald Gibbs, MD
Orthopedic Surgery
 Ronald Teed, MD
Podiatry
 Scott A. Doherty, DPM

Other Specialists Available:

Ophthalmology
 Martin Balish, MD
 Jennifer Ballentine, MD
Otolaryngology (ENT)
 Roger Miller, MD

503-842-5546 503-815-2292

WHERE TO FIND US



LIFE AND HEALTH is published as a community service for the friends and patrons of TILLAMOOK COUNTY GENERAL HOSPITAL, 1000 Third St., Tillamook, OR 97141, telephone 503-842-4444, www.tcgh.com.

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Life & Health

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