

HEALTH SCENE®

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SYSTEM (NEWS)



Timothy J. Crowley

CROWLEY NAMED EIGHTH PRESIDENT/CEO OF CMH

Timothy J. Crowley, 55, of Grand Rapids, Mich., became the eighth president and chief executive officer of CMH Regional Health System/Clinton Memorial Hospital on Aug. 18. Turn to page 6.



FALL ARRIVES FOR ORIGINAL EAST WING

Fall has arrived, and along with it the fall of the original east wing of Clinton Memorial Hospital, which has served the community for more than 52 years. Turn to page 6.



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HEALTH CARE AT YOUR DOORSTEP



PERSONAL ATTENTION: CMH Home Care Services case manager Polly Vaughan talks with a patient.

FOR MOST OF US, THERE IS NO PLACE MORE COMFORTABLE OR FAMILIAR THAN OUR OWN HOME. AND THAT EXPLAINS THE APPEAL OF HOME HEALTH CARE. ♦ IF

you're ill, disabled or recovering from a hospital stay, home health care can bring a wide range of medical and social services directly to your home—allowing you to remain where you're most at ease. Among the many services:

- Doctors can plan and supervise customized medical care.
- Nurses can help with injections, IV therapy, wound care and the management of medical conditions from diabetes to cancer.
- Physical therapists can help anyone with an injury regain lost strength and flexibility.
- Speech pathologists can help stroke patients learn to communicate again, and occupational therapists can provide equipment and guidance that makes bathing, dressing and eating easier for those who are frail.
- Home health aides and homemakers can lend a hand with grooming, cleaning and cooking.
- Dietitians can provide personalized nutrition advice.

ANYTHING EXCEPT SURGERY Not just people, but medical equipment—from wheelchairs to respirators—can also come straight to you. In fact, “home care services are now so extensive that virtually

A key question: Who PAYS FOR home care?

Two words spring to mind for most people when they consider home health care: Who pays?

Several options are available, including private insurance companies and government programs, such as Medicare and Medicaid, the Department of Veterans Affairs and block grant programs from social services.

Often, services are only covered if they are

prescribed by a doctor. So ask your doctor if he or she will recommend it.

Also check with the home health care provider you are considering and your insurance provider to see what services might be covered.

For more information, go to the Web site of the National Association for Home Care at www.nahc.org.



anything except surgery can be performed safely at home,” says Val J. Halamandaris, president of the National Association for Home Care.

Precisely because of the scope of its offerings, home health care can help people of all situations and ages—from a premature infant who still needs specialized medical care after an extended hospital stay, to a terminally ill senior who does not want another hospitalization.

Like any service, however, home health care varies in quality. So ask

your doctor, a hospital discharge planner or your local Agency on Aging to recommend a home care provider with a reliable staff and a sound reputation. Any home care program that is certified by Medicare has met federal requirements for patient care.

CMH Home Care Services can be reached at (937) 383-1188.

INSIDE

- 2 STAFF UPDATE DOCTORS JOIN CMH
- 6 ALTERNATIVES MEDICAL ACUPUNCTURE OFFERED
- 7 PROSTATE CANCER NEW THERAPY AVAILABLE
- 8 SAFETY IN NUMBERS CMH IN TOP 20

FLEMMING PRACTICES, PREACHES DENTAL HEALTH



Dr. Saranna Flemming

“We have so many opportunities here to help people who have never had access to dental care,” she says.

The goal of CCDS, a collaborative effort of the Coalition for a Healthier Clinton County, is to provide dental care to low-income, underinsured and uninsured individuals.

“So many of the people we see are hard-working people who just can’t afford private practice prices,” says Dr. Flemming.

CUTTING HER TEETH Dr. Flemming cites her own dentist as being a source for her interest in the field. “He really inspired me to want to work in health care,” she says.

She’s not the only one in her family with an interest in oral health care. Her husband, Dexter, is currently completing the oral maxillofacial surgery program at Ohio State University.

When they’re not discussing oral health, however, you can find them focused on feet—their own. “We love playing soccer,” she says. “My husband and I play every chance we get!”

Originally from Detroit, Dr. Flemming received her doctorate of dental surgery, as well as her bachelor’s of science degree in biopsychology and cognitive sciences, from the University of Michigan. While in dental school, she was community service chairperson for the Student National Dental Association and organized visits to Detroit elementary schools to demonstrate good oral care. She also

completed several internships in public health clinics. She belongs to both the Ohio Dental Association and the American Dental Association (ADA).

VOLUNTEER SPIRIT Dr. Flemming also has a special interest in volunteer work. She volunteered with the Detroit Project, cleaning up vacant homes and doing landscape work. She also worked with the Hope Dental Clinic, which provides free services for patients without dental insurance.

“My parents were very involved in community work,” she says. “I’ve learned from my experiences to try and believe the best about every person I meet, and to never judge people. This is how I approach my work too.”

SOMETHING TO CHEW ON Dr. Flemming cannot overemphasize the importance of being proactive when it comes to dental care in order to prevent future problems. According to the ADA, many adults develop some type of periodontal, or gum, disease. “It’s essentially an infection of the tissues that support the teeth,” she says.

The ADA has outlined some simple things you can do to help prevent gum disease. “Brush your teeth twice a day, and clean between your teeth with floss or an interdental cleaner once a day,” Dr. Flemming says. “And, of course, regular checkups and professional cleanings with your dentist are important.”

Dr. Flemming enjoys working with CCDS to make sure that good dental care is available to everyone.

“The dental staff here is both caring and compassionate, and I am very proud of our services,” she says. “We can truly say to our patients, ‘We are here to help you.’”

One look at Dr. Saranna Flemming’s ever present and sparkling smile tells you she practices what she preaches.

“Practicing good oral care is one area of health education I am especially interested in,” says Dr. Flemming, who is the first staff dentist for Clinton Community Dental Services (CCDS). “There are so many factors that can affect your oral health.

“For example, many people don’t know that having diabetes, taking some types of medication, and chewing or smoking tobacco are some of the factors that can contribute to gum disease,” she says.

LOW-COST CARE Dr. Flemming started at the newly opened dental clinic in August.

FOCUS ON CMH PHYSICIANS

ONCOLOGISTS WILL WORK WITH NEW CANCER TREATMENT

Dr. Edward Hughes and Dr. Donald Marger, radiation oncologists with First Dayton Cancer Care in Dayton, have joined the CMH Regional Health System Medical Staff.

They will work on cases involving Clinton Memorial Hospital’s new prostate cancer treatment to be offered at the Surgery Center this fall. The treatment, brachytherapy, is minimally invasive, performed as an outpatient procedure in one to three hours and results in fewer long-term side effects.

Dr. Hughes, of Kettering, earned his medical degree and doctor of philosophy degree from the Johns Hopkins University School of Medicine, Baltimore, Md., with the highest honors, including Alpha Omega Alpha and Phi Beta Kappa. He received his bachelor’s of science degree in biology, magna cum laude, from Brown University, Providence, R.I.

Dr. Hughes is board-certified by the American Board of Radiology in radiation oncology. He received his oncology training at Harvard’s Joint Center for Radiation Therapy and the Dana Farber Cancer Center in Boston. He has served as a full-time faculty member at the University of Pennsylvania and practiced radiation oncology for more than 15 years. He served as the medical director in radiation oncology at Kettering Medical Center until he founded First Dayton Cancer Care.

Dr. Marger, of Centerville, earned his medical degree and bachelor’s of science degree from Duke University, Durham, N.C. He received his radiation oncology training at Yale University, New Haven, Conn. He served as the medical director of radiation oncology at Franciscan Medical Center and at Good Samaritan Hospital before joining First Dayton Cancer Care.

Dr. Marger is board-certified by the American Board of Radiology in radiation oncology. He specializes in head and neck, prostate, lung, breast, colorectal and gynecologic cancers. He has practiced radiation oncology in Dayton since 1974.

Dr. Hughes and Dr. Marger combined their experience and knowledge to create a radiation center with the newest technology and services. First Dayton Cancer Care is also staffed by a certified, full-time physicist, and radiation therapists and nurses.

OPHTHALMOLOGIST JOINS CMH MEDICAL STAFF

Dr. Nicholas Marsico, an ophthalmologist with Eye Specialists of Ohio, has joined the CMH Regional Medical Staff. Eye Specialists of Ohio has offices in Wilmington and throughout southern Ohio, including Washington Court House, Chillicothe and Circleville.

Dr. Marsico received his bachelor’s of science degree from Ohio State University where he graduated summa cum laude with honors and Phi Beta Kappa. He received his medical degree from Ohio State University College of Medicine. After a medical internship at the Mount Carmel Medical Center in Columbus, he completed residency training in ophthalmology at Boston University School of Medicine. He completed his fellowship training at the University of Pittsburgh Eye and Ear Institute in corneal disease and refractive surgery.

Dr. Marsico is board-certified in ophthalmology and fellowship-trained in cornea/external disease and refractive surgery. He is a member of the American Academy of Ophthalmology, the American Society of Cataract and Refractive Surgery, and



Dr. Edward Hughes



Dr. Donald Marger



Dr. Nicholas Marsico

ORTHOPEDIC SURGEON HITS GROUND RUNNING

Dr. Mark Knable readily admits that he likes to keep busy. That has not been a problem since he hit the ground running in his new practice at 781 W. Locust St., Wilmington.

"I've already been seeing many patients with musculoskeletal problems in my new Wilmington office," says Dr. Knable, an osteopathic physician and orthopedic surgeon who joined the medical staff of CMH Regional Health System this September.

"Osteopathy is a philosophy of medicine that emphasizes the interrelationship of body systems, especially the musculoskeletal system and the natural ability of the body to heal itself," he says.

Osteopathic medical schools put an emphasis on training students to be primary care physicians and focus on

preventive health care. Doctors of osteopathy also focus on treating the "whole person" in their approach to medicine, taking into account a patient's home and work environments.

A PERSONAL CHOICE

Dr. Knable received his doctorate of osteopathy degree from the Ohio University College of Osteopathic Medicine after completing a bachelor's of science degree in zoology at Ohio University. He completed an internship and residency in orthopedic surgery at Brentwood Hospital in Warrensville Heights, Ohio. He is certified by the American Osteopathic Board of Orthopedic Surgery. He also belongs to the American Osteopathic Association, the American Osteopathic Academy of Orthopedic Surgery and the American Osteopathic Academy of Sports Medicine.

"I received additional training during my residency in musculoskeletal pathology, hand surgery, pediatric orthopedics/sports medicine and orthopedic trauma," Dr. Knable says. "The musculoskeletal approach of osteopathy is a natural match for my specialty of orthopedic surgery."

A NEW HOME

Dr. Knable came to Wilmington with his wife, Jo Ann, and their three children, from Athens, Ohio, where he was chief of orthopedic surgery at O'Bleness Memorial Hospital. He was also an assistant professor of orthopedic surgery at Ohio University and, later, the orthopedic surgeon for the university's hockey team.



Dr. Mark Knable

the International Society of Cataract and Refractive Surgery.

Dr. Marsico offers laser vision correction for nearsightedness, farsightedness and astigmatism, as well as corneal transplantation, cataract surgery, and treatment of glaucoma and diabetic eye disease. Dr. Marsico sees patients in Wilmington at 721 W. Main St. on Wednesdays from 8 a.m. to 5 p.m. For an appointment, call (937) 382-7724.

UROLOGIST MOVES CINCINNATI OFFICE TO WARREN COUNTY

Dr. Christopher Lawley, a board-certified urologist who has been on the CMH Regional Health System Medical Staff for 14 years, has moved his Cincinnati office from 7770 Cooper Road in Blue Ash to a new CMH medical office building in Maineville.

Dr. Lawley, who practices with Southwestern Ohio Urology, became the first tenant of the Maineville Health Center located at Maineville Crossing, SR 48 and US 22/SR 3 in Hamilton Township, Warren County.

He continues to see patients at Southwestern Ohio Urology's Wilmington office, at 1150 W. Locust St., along with Dr. Philip Aschi, a board-certified urologist who has been on the CMH Medical Staff for seven years.

Southwestern Ohio Urology specializes in pediatric and adult urology, including prostate disease, impotence, bladder disorders, infertility, incontinence, vasectomies, vasectomy reversals and kidney stones.

They accept most insurance plans, and new patients are welcome. Appointments can be made by calling toll free, 1-866-732-3227.

ALLERGY/IMMUNOLOGY SPECIALIST OPENS OFFICE IN SPRINGBORO

Dr. V.B. Revan, a specialist in allergy and immunology on the CMH Regional Health System Medical Staff, has opened a third office, at 562 N. Main St., in Springboro. He sees patients there weekly on Wednesdays from 1 to 6 p.m.

Dr. Revan began practicing at the Allergy and Asthma Center, Inc., 110 Fairway Drive, Suite 2, Wilmington, in the summer of 2002. He opened a second office at 1000 Columbus Ave., Suite B, in Lebanon last winter.

Appointments at any of Dr. Revan's offices can be made by calling (937) 655-9179 or toll free at 1-866-655-9179.

His practice includes the diagnosis and treatment of hay fever, asthma, hives, allergies (including food and drug allergies), sinus disorders and immune deficiencies.

Dr. Revan completed a residency at Wayne State University's Detroit Medical Center and is board-certified in internal medicine. He also served as a faculty member at Wayne State University's School of Medicine. He recently completed a fellowship in allergy and immunology at the University of Michigan.



Dr. Christopher Lawley



Dr. V.B. Revan

WALT CERTIFIED AS EDUCATOR, PUBLISHES ARTICLE

Janet Walt, of Wilmington, recently completed the studies necessary to become certified as a perioperative nurse educator. Walt is surgical services education coordinator at Clinton Memorial Hospital, the anchor of CMH Regional Health System.



Janet Walt

During the course of her studies, she co-wrote an article, "Generation Next—Working With a New Generation of Nurses," that was the cover story in the September issue of the *Association of Operating Room Nurses* national journal.

Walt received her bachelor's of science degree in nursing from Capital University in Columbus and her master's of arts in applied behavioral science from Wright State University in Fairborn. She is certified as an operating room nurse and a nurse clinical educator.

She started at Clinton Memorial Hospital in 1989 as an Intensive Care nurse and has worked in Surgical Services since 1992 and as an Operating Room/Post Anesthesia Care nurse until 1999 when she became education coordinator.

MICK COMPLETES MASTER'S DEGREE, RECEIVES CERTIFICATION

Ray Mick, of Washington Court House, recently completed his master's of science in nursing degree with specialty preparation as an adult nurse practitioner at Otterbein College. Mick also



Ray Mick

recently achieved board certification as an adult nurse practitioner through the American Nurses Credentialing Center, a national certifying agency for nursing specialties.

Mick started his nursing career after being the first male graduate of Fayette County Memorial Hospital's School of Practical Nursing in Washington Court House in 1977. He received his associate's degree in applied science in nursing from Clark Technical College in Springfield and became licensed as a registered nurse in 1982. Mick completed a bachelor's of science degree in nursing through Ohio University in Athens in 1996, and was inducted into the international nursing honor society Sigma Theta Tau in 2002.

Mick is a member of the American Association of Cardiovascular and Pulmonary Rehabilitation.

Mick has been employed at Clinton Memorial Hospital for 17 years and is currently the Cardiac and Pulmonary Services coordinator.



STEPPING **out** WITH A NEW HIP

WITH EVERY STEP WE TAKE, OUR HIPs FEEL PRESSURE THAT IS NEARLY FOUR TIMES OUR BODY WEIGHT. IS IT ANY WONDER THEN THAT OUR HIPs SOMETIMES WEAR OUT? ♦ ACCORDING TO THE AMERICAN ACADEMY OF ORTHOPAEDIC SURGEONS (AAOS), EVERY YEAR ABOUT 160,000 AMERICANS

have their old hips replaced with new synthetic parts—a procedure designed to ease pain and aid mobility.

“It’s a very good procedure,” says Ramon Jimenez, M.D., an AAOS spokesman. And when it’s done, he adds, “[You’ll] be able to do an awful lot of things [again] that make life enjoyable.”

WHEN GOOD HIPs GO BAD The hip is a ball-and-socket joint. The “ball” is at the top of your thighbone, or femur, and is called the femoral head. It fits into a cup—or socket—in the side of your pelvis called the acetabulum. (Make a fist with one hand and cup your other hand over it. That’s how the femoral head fits into the acetabulum.)

Both the femoral head and the acetabulum are covered by articular cartilage, which acts as a cushion between the two bones and smooths their movement.

According to the AAOS, the most common cause of hip problems is arthritis, which damages the articular cartilage and makes movement painful. Sometimes the arthritis is due to a previous injury. Most often, though, the culprit is osteoarthritis, which causes a gradual wear and tear of cartilage.

Fractures from falls are another common reason to have a hip replacement. Older people are particularly vulnerable to hip fractures because their bones are fre-

quently weakened by the bone-thinning disease osteoporosis.

WHEN SURGERY IS NEEDED Surgery isn’t usually the first choice for hip problems, except perhaps for fractures. According to the National Institute of Arthritis and Musculoskeletal and Skin Diseases, your doctor probably will first try other methods to ease pain and movement, such as: ♦ Physical therapy. ♦ Pain medications. ♦ Anti-inflammatory drugs.

If these methods fail, surgery may be an option. According to Dr. Jimenez, signs that hip replacement might be needed include: ♦ Increasing pain and disability. ♦ Inability to get up from a chair. ♦ Difficulty navigating stairs. ♦ Joint stiffness, especially in the morning.

THE SURGERY, STEP BY STEP A surgery that involves replacing joints is called an arthroplasty. If only one part is replaced, it is called a hemiarthroplasty.

Hemiarthroplasty is usually reserved for fractures, according to Dr. Jimenez. When the problem is osteoarthritis, the entire hip is usually replaced in a surgery called total hip arthroplasty.

Replacing any part of the hip is major surgery that usually requires general anesthesia. The operation can take anywhere from 90 minutes to three hours. In general,

a total hip replacement entails these steps:

- The surgeon makes an incision several inches long over the hip joint.
- The femoral head (ball) is cut from the femur.
- The acetabulum (socket) is reamed, or smoothed, out.
- A metal cup is fitted into the pelvis, replacing the worn acetabulum.
- A plastic liner is placed within the metal cup, mimicking the articular cartilage.
- A hole is drilled into the top portion of the femur.
- A metal rod is fitted into the hole. A metal ball is fitted on its top, replacing the femoral head.

Sometimes cement is used to hold the replacement pieces in place. In other cases, cement isn't necessary because porous material in each piece allows bone growth to hold the piece in place.

You can expect to be in the recovery room for a few hours, according to the AAOS. After several days of increasing physical therapy and instruction, you'll leave the hospital for either home or, in some cases, a rehabilitation center for more therapy.

PLAN AHEAD It can pay to plan ahead for your hip replacement surgery, if possible. The following "before surgery" suggestions come from Dr. Jimenez, the AAOS and others. These tips can help make both your surgery and recovery go more smoothly.

- Exercise your leg and hip muscles, if you can. Dr. Jimenez recommends walking (not swimming) in water. "The stronger and more flexible you are prior to surgery, the better you will do after," says Victoria Brander, M.D., co-author of *Arthritis of the Hip & Knee: The Active Person's Guide to Taking Charge* (Peachtree Publishers, 1998).

- Arrange for family or friends to stay with you when you return home.

● Be sure you have a high-sitting, firm chair at home, preferably one with arms, Dr. Brander says. You'll want to avoid leaning forward to get out of a chair during your recovery.

- Get a raised toilet seat, and put a chair or bench in your shower to make bathing easier. Also consider installing a handheld shower head and some grab bars.

- Have an extra pillow available to put between your legs while sleeping.

- Buy a reaching-and-grabbing tool. Place any household items you think you might need after surgery at arm level.

POSSIBLE COMPLICATIONS The potential complications of hip replacement are few and depend in part on your health at the time of surgery, according to Dr. Jimenez. "It's a pretty safe procedure," he says.

Infection is possible but occurs in less than 2 percent of cases, according to the AAOS. You will probably receive intravenous antibiotics for the first few days after surgery.

You might be instructed to wear support hose or leg coverings to prevent blood clots, or be given blood-thinning medication. You will be asked to cough frequently to clear lung congestion and avoid pneumonia.

Weakened muscles in the hip area make dislocation of your new hip a real danger, Dr. Brander says. So before you leave the hospital, you will be given instructions on dos and don'ts for your new hip.

GOOD EXPECTATIONS Your new hip will probably let you do many of the things you did before your old hip became painful.

"[You can] go back to bike riding, swimming, golf," says Dr. Jimenez. "You can play tennis"—although he recommends sticking to doubles and playing singles only if you are "ready to applaud your opponent's really great shot, rather than diving to hit it."

Some things, however, you will not be able to do—such as jogging or other high-impact activities.

"Accept the fact that you have a hip to protect," says Dr. Jimenez. If you do, your new hip should last anywhere from 15 to 20 years.

LEARN MORE For additional information on hip replacements, visit:

- The AAOS Web site at <http://orthoinfo.org>, or call 1-800-346-AAOS (1-800-346-2267).

- The Web site of the National Institute of Arthritis and Musculoskeletal and Skin Diseases at www.niams.nih.gov, or call toll free 1-877-22-NIAMS (1-877-226-4267).



YOUR NEW HIP WILL PROBABLY LET YOU DO MANY OF THE THINGS YOU DID BEFORE YOUR OLD HIP BECAME PAINFUL.

EXERCISE IS A KEY ingredient to a successful recovery and a return to normal life after hip replacement surgery, says Victoria Brander, M.D., spokeswoman for the American Academy of Physical Medicine and Rehabilitation (AAPM&R). And it can begin in the recovery room after surgery, when you might be asked to move your foot up and down or rotate your ankle several times. A little exercise might seem like a lot to ask just after major surgery, but the operation only repairs the bony part of the hip joint, notes Dr. Brander. Postoperative rehabilitation is necessary to restore muscle strength in that area.

THE DAYS AHEAD

You can expect to get out of bed and into a chair the day after surgery. By the third or fourth day, you'll probably be up and walking short distances, either on crutches or with the aid of a walker.

A physical therapist will take you through strengthening and stretching exercises in the hospital. An occupational therapist will show you how to bathe and dress yourself.

Many people can go home within a few days of surgery. Older or less mobile people might transfer to a rehabilitation facility for a week or more, until they can care for themselves safely at home.

"After about three to four weeks, once the joint is well-healed and [you] are walking with less pain, then the more aggressive rehabilitation starts," usually at an outpatient clinic, Dr. Brander says.

This can include resistance exercises, using elastic tubes or exercise machines. You might also be given a customized series of exercises to perform at home.

STICK WITH IT

It's important to follow your prescribed exercise program, not only to restore strength and function to your hip but also to avoid injury, according to experts. Some movements—such as bending over or twisting—shouldn't be attempted without instruction.

"After about a month, we expect people to be walking at least two to five blocks on a regular basis," says Dr. Brander. After three months, she says, you should be walking at least a mile, three to four days a week.

Staying steady ON YOUR FEET helps prevent fractures

The best way to avoid a hip fracture is to prevent falls.

Ninety percent of hip fractures are the result of falls, according to the American Academy of Orthopaedic Surgeons (AAOS). And every year in this country, one of every three adults 65 and older suffers a fall, reports the Centers for Disease Control and Prevention (CDC).

So how can you prevent falls? Studies have shown that maintaining a regular exercise program is one of the best ways to reduce your chance of falling. A fitness program that includes balance and movement exercises, as well as strength training, can be especially helpful for seniors, reports the American Academy of Physical Medicine and Rehabilitation (AAPM&R).

SEE YOUR DOCTOR

A visit to your doctor might also lower your risk for falling, says the CDC. Topics to discuss may include:

- Your medications. Some medications, such as those prescribed for high blood pressure or depression, can increase your risk for falls. In that case, your doctor might be able to prescribe a lower dose or a different medication.
- A hearing and vision checkup. Difficulties hearing or seeing can lead to falls.
- Foot problems. Painful, sore feet can cause you to fall. Tell

your doctor if you have difficulty trimming your own toenails.

- Any dizziness upon awakening. Talk to your doctor if you sometimes are dizzy when you wake up. The solution could be as easy as waiting a few minutes before getting out of bed.

Also be sure to discuss any problems you have with balance, gait or other mobility concerns.

WATCH FOR HOME HAZARDS

More than half of all falls occur in the home, according to the CDC. You can make your home safer, however, by using the following checklist from the CDC, AAOS and AAPM&R:

In the bathroom

- ◆ Put grab bars in the shower and tub. ◆ Install a raised toilet seat. ◆ Take up bath mats when not in use. ◆ Mop up puddles immediately.

On stairways

- ◆ Install and use handrails. ◆ Secure carpet or treads. ◆ Don't carry items that block your view of the next step.

Throughout the house

- ◆ Remove clutter from floor, walkways. ◆ Be sure all areas are adequately lit. Use night-lights. ◆ Remove electrical cords and wires from walkways. ◆ Make sure telephones can be reached from the floor, or use a portable phone.

CMH OFFERS MEDICAL ACUPUNCTURE

CMH Regional Health System now offers medical acupuncture as a part of the new CMH Complementary and Alternative Medicine Program. Medical acupuncture is performed by Dr. Patrick Gentile, director of the program, at 110 Fairway Drive, Suite 1, Wilmington (behind the CMH Rombach Health Center). To make an appointment, call (937) 383-6924.

It is a remarkably safe therapy that most patients find a relaxing and rewarding experience.

Dr. Gentile, a board-certified internist, hematologist and oncologist, studied acupuncture at UCLA. He completed a medical internship and residency at the Jewish Hospital in Brooklyn, a fellowship in hematology at Mount Sinai School of Medicine in New York City and a fellowship in medical

oncology at Memorial Sloan Kettering Cancer Center in New York City.

TREATING PAIN Acupuncture involves the insertion of sterile, individually packaged, ultra-thin needles into the skin to provide relief of pain or treatment for other medical problems.

Acupuncture is a useful treatment for low back pain, cervical pain, fibromyalgia, sinusitis and other medical conditions, according to Dr. Gentile. It is also useful in treating infertility and chronic fatigue syndrome, and for patients with low energy. Patients with addictions also respond well to acupuncture manipulation, Dr. Gentile says.

“As a physician with 30 years of clinical experience, I have been impressed with the results achieved with acupuncture,” Dr. Gentile says. “It is a remarkably safe therapy that most patients find a relaxing and rewarding experience.”

MORE ALTERNATIVES A growing number of hospitals offer complementary and alternative medicine (CAM). An American Hospital Association survey in 2000 revealed that 15 percent of hospitals offered CAM therapies and 60 percent of medical schools offered CAM courses.

CMH plans to add CAM therapies, such as inpatient massage, stress reduction and smoking cessation. A weight-management program, Lighten Up!, currently available only for CMH employees, will also be introduced to the public.

“The emphasis of the programs will be to complement traditional medical practice, rather than to replace or challenge what doctors do,” Dr. Gentile says. “I see these services as useful adjuncts to CMH’s other health care services.”



FALL ARRIVES FOR ORIGINAL EAST WING

Fall has arrived, and along with it the fall of the original east wing of Clinton Memorial Hospital, which has served the community for more than 52 years.

All of the CMH Regional Health System clinical services formerly located in the east wing, including Intensive Care and Mother-Baby Care, moved to the new four-story patient tower this summer. Demolition of the east wing came closer to reality this summer with the exodus of the CMH Auxiliary Gift Shop, closing of the old chapel and fencing off of the former Main Street entrance to the hospital.

The demolition of the wing will clear the way for completion of other components that will be easily accessible from the new hospital atrium or via elevator, including a low-risk cardiac diagnostic cardiovascular catheterization laboratory, and a new gift shop, chapel, rehabilitation area, pharmacy and secondary north entrance.

HEART CARE AT HOME A cardiac or vascular catheterization is a medical procedure that is performed to see if there are blockages in arteries. The lab will be located near the location of the former cafeteria in the vicinity of the Surgery Center. It will add a new dimension to CMH’s existing cardiac and vascular services. Patients will no longer have to travel to Dayton, Cincinnati or Columbus to have the procedure performed.

The gift shop is temporarily located in the atrium but will move into new space near the top of the atrium stairs. The expanded chapel will be located very close to its former spot, near the secondary entrance that will replace the former northern entrance.

CHAPEL FORMALLY CLOSED Before renovation, Pastor June Fryman, of the CMH Chaplaincy Program, helped to formally close the hospital’s old chapel with special prayers and scripture readings in August.

This winter, all patient access to new Radiology Services should be via the entry doors off of the atrium. The renovation of current adjacent Radiology Services will be complete by spring 2004.

Other phases of the ongoing building and renovation project can move along more quickly with the demolition of the east wing. These phases include creating a new pharmacy on the third floor, between the new patient tower and original hospital, near the old location of Mother-Baby Care and Surgical Services, and a new Rehabilitation Services area on the second floor, between the new patient tower and original hospital.

CROWLEY NAMED CMH’S NEW LEADER

Timothy J. Crowley, 55, of Grand Rapids, Mich., became the eighth president and chief executive officer of CMH Regional Health System/Clinton Memorial Hospital on Aug. 18.

Crowley was officially offered the position on July 23, following his selection at the regular meeting of the CMH Board of Trustees. His appointment followed an extensive, half-year nationwide search.

CMH’s interim CEO and President Eloise Y. Moran (since December 2002) returned to her former post on the CMH Board of Trustees in October.

VETERAN LEADER Crowley has more than 27 years of executive health care experience and most recently served as senior vice president and chief operating officer for Metropolitan Hospital in Grand Rapids, a position he started in 1999. The hospital is a 238-bed, nonprofit osteopathic teaching hospital affiliated with the Michigan State University College of Osteopathic Medicine. The hospital’s parent company, Metro Health Corp., also owned a Medicaid HMO and a 52-provider primary care practice with nine sites during Crowley’s tenure there.

“My goal, as is the goal of our board, is to be the very best at everything we do,” Crowley says. “I am anxious to

work with our medical staff, administrative team and all employees to help lead us to that goal.

“I am delighted to be joining CMH at this exciting time in its history, and I am looking forward to moving to and being an active part of the community.”

Crowley, a native of Chicago, has a master’s degree in health administration from St. Louis University and a bachelor’s degree in psychology from the University of Illinois. He is an American College of Healthcare Executives diplomate and a member of a variety of other professional health care and community organizations, including the West Michigan Health Executives Group, the St. Stephen Catholic Church, and the Rotary Club of Wyoming, Mich.

Crowley’s wife, Kate, teaches seventh and eighth grade language arts. Their son, Brendan, is a second-year student at DePaul University School of Law in Chicago, and their daughter, Caitlin, is a graduate of Grinnell College in Iowa.

AT A CROSSROADS CMH Board of Trustees Chairman Marvin Chamberlin says the extensive search process was important in order to get the best possible leader for CMH, which is at an important crossroads.

“There is a lot going on at the hospital campus and throughout our system,” Chamberlin says. “I think Tim proved that he is one who can keep pace with all that is happening and is up for new challenges.”



Timothy J. Crowley talks with Brandy Burks during his first week at CMH.

CMH SURGERY CENTER

IMPROVED THERAPY FOR PROSTATE CANCER

For 180,000 American men diagnosed with prostate cancer each year, the only things more disturbing than the diagnosis are the prospect of undergoing treatment and the possibility of experiencing side effects. Surgery and traditional radiation therapies can result in long-term complications, such as impotence, infertility, and urinary and digestive tract difficulties.

This fall Clinton Memorial Hospital will begin offering a new treatment called prostate brachytherapy, which is minimally invasive, performed as an outpatient procedure in one to three hours, and results in fewer long-term side effects. Brachytherapy will be performed in Clinton Memorial Hospital's new Surgery Center, which opened in the spring.

HIGH SURVIVAL RATE "Although one in every six American men will develop prostate cancer in his lifetime, the 10-year disease-specific survival rate for men treated with brachytherapy is 98 percent," says Dr. Philip Aschi, a urologist and member of the CMH Regional Health System Medical Staff, and who practices at Southwestern Ohio Urology in Wilmington. Dr. Aschi has been performing this



NOW PERFORMED AT CMH: Brachytherapy has a quick recovery period and a lower incidence of side effects, such as impotence and infertility, than surgery or traditional radiation.

procedure since 1998 in Cincinnati, but will now perform it exclusively at Clinton Memorial Hospital.

In recent years, according to Dr. Aschi, Clinton County has had a higher rate of prostate cancer compared to the state average. In 1999, according to the Ohio Department of Health, Clinton County (with 44 cases of prostate cancer) had the highest incidence rate (261.1 per 100,000 males) in the state. Farming communities in general have a much higher rate of this type of cancer, he says.

The prostate gland is located under a man's bladder and produces a fluid necessary to the reproductive process. Cancer of the prostate is a disease in which malignant cells develop and form a tumor, most often in the outer area of the prostate gland. This condition is called localized prostate

cancer. Brachytherapy is most effective when the cancer is in this localized state.

FASTER RECOVERY Brachytherapy is a form of internal radiation in which small radiation sources, called seeds—about the size of a grain of rice—are implanted in the prostate. The radiation source then works from the inside to destroy the cancerous tumor. The seeds remain in the prostate permanently but are inactive within a year.

Recovery following the procedure is faster, and the incidence of postoperative side effects is lower than with surgery and radiation, according to Dr. Aschi.

FEWER COMPLICATIONS Although short- and long-term side effects vary among patients, a large number of men are active again after only a few days. And many have a relatively low occurrence of long-term problems, such as incontinence and impotence, Dr. Aschi says.

Prostate cancer is second only to skin cancer as the most common type of cancer found in American men. Although men of any age can contract the disease, it is found most often in men over 50. Since there are no early symptoms, regular testing is the most effective way to discover the disease in its earliest and most treatable stage. Annual testing for men over 50 is recommended.

[For more information about brachytherapy, call \(937\) 382-1141.](#)

"With a treatment program that boasts such a high success rate and is so much easier for patients to tolerate, there's really no reason why any man should avoid having regular prostate tests nor to believe he doesn't have a good chance of recovering if he develops prostate cancer," Dr. Aschi says.

Ask your family physician about brachytherapy, or call Southwestern Ohio Urology, 1150 W. Locust St., Wilmington, at (937) 382-1141.



LEAVING THE HOSPITAL

FOR MANY PATIENTS, CARE AND SUPPORT DOES NOT STOP AT THE HOSPITAL EXIT

Hospital stays are often stressful, and going home can cause more stress, especially for someone who isn't 100-percent physically or emotionally prepared for returning to a previous lifestyle.

To ensure that patients make the best transition possible from the hospital to being back at home, Clinton Memorial Hospital works with a multitude of community resources, including its own Home Care Services, which provides registered nurses, social services, physical and occupational therapists, and nurses aides for home visits.

"Care for a patient is important—even when a patient has returned home—because our goal is to keep patients at their ultimate level of health," says Pam Daniel, CMH Regional Health System Care Management manager. Clinton Memorial Hospital is the anchor entity of CMH Regional Health System.

CREATING CARE PLANS Whether a patient is having a baby or congestive heart failure, physicians, nurses and other specialists will assess the patient's situation and make recommendations. And before patients leave the hospital, specially trained staff can make appointments and referrals to appropriate programs to make sure their health is not compromised upon a return to a nonclinical setting.

CMH Care Management, formally launched as a separate department in 2000, is responsible for overseeing the care of a patient before, during and after a stay at the hospital. Case managers, who are also registered nurses, meet with every inpatient and observation patient to assess what kinds of community services may be needed once the patient is discharged.

A FRIENDLY NETWORK According to Daniel, there are two distinct advantages to the CMH system. First, physicians and case managers get to know each other, which facilitates a working relationship. Second, patients can also become more comfortable with their case managers because they remain assigned to the patients' physicians.

Michelle Roth, a CMH medical social worker, helps patients that have been referred to her by hospital staff. Her knowledge of the community resources available is vital to getting the proper services for soon-to-be-discharged patients.

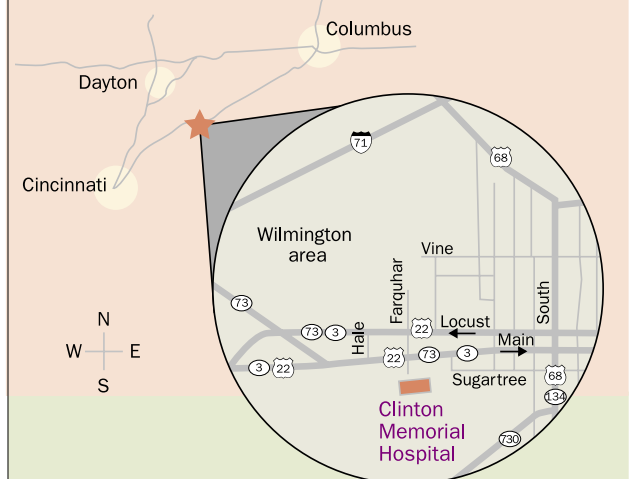
"On any given day I could be helping someone with housing, helping someone pay for medicine that they cannot afford or apply for services that would pay for their

medical care," Roth says.

Roth's job requires her to know the workings of the community, and she participates in several community

—Continued on page 8

Where to FIND US



HEALTH SCENE is published as a community service for the friends and patrons of CMH Regional Health System, 610 W. Main St., Wilmington, Ohio 45177, telephone (937) 382-9464, www.cmhregional.com.

Timothy J. Crowley
President and CEO

Dana Dunn
Editor

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HEALTH SCENE

CMH RECOGNIZED FOR WORKPLACE SAFETY

CMH Regional Health System has been recognized for its workplace safety record in 2002 by the Ohio Hospital Association (OHA). CMH was recognized as a Top 20 Percent Award recipient in OHA's Statewide Hospital Safety Campaign.

In the face of new challenges, such as bioterrorism, hospitals throughout Ohio are celebrating 50 years of recognition for their superior efforts to keep employees safe. The 50th anniversary of the safety campaign honored 37 Ohio facilities for their 2003 performance. The awards were created in 1953 by OHA and the Industrial Commission of Ohio to promote workplace safety.

This year's 117 participating hospitals were divided into nine groups based on number of employees. To participate in the campaign, hospitals submitted information on workplace safety. Facilities base this information on the federal Occupational Safety and Health Administration regulations, which government hospitals maintain for the Ohio Department of Commerce.

The number of on-the-job injury cases requiring days away from work ranged from zero to 139 this year, and the total number of days missed ranged from zero to 4,572. The safety campaign also considers injury rate, determined by dividing the number of injury cases requiring days away from work per 200,000 hours (the equivalent of one year with 100 full-time employees) by the total number of hours worked at the facility that year. The injury rates ranged from zero to 8.30, with a 1.72 average for participating hospitals.

CMH's injury rate was .31. The health system's total full-time equivalent employees totaled 742 in 2002. The total number of hours worked was nearly 1.3 million hours. CMH had 20 reportable injuries to the Occupational Safety and Health Association (OSHA), but only two individuals lost a total of 19 workdays as a result. CMH employees had 95 days of restricted work activity due to reportable injuries in 2002.

Members of CMH's Environment of Care Committee, which is a watchdog for safety, include Alyssa Alden, Martha Bourgeois, Brent Clark, Jane Clemans, Dr. David Cohen, Dale Hamilton, Scott Henman, John Giga, Ray Mick, Leslie Nahigyan, Kyle Parker, Janet Quigley, Debbie Robison, Judy Schnatz, Mike Slusher, Charley

Snider, Lynn Sonner and John Sutherland.

The Ohio Hospital Association was established in 1915 as the first state-level hospital association in the United States. As one of Ohio's largest professional and educational organizations, OHA's mission is to provide leadership by working with member hospitals to meet the health care needs and improve the health status of the communities they serve. Visit OHA's Web site at www.ohanet.org.



**Mammographer
Carla McCullough**

CMH OFFERS SCREENING MAMMOGRAMS FOR \$20

CMH Regional Health System, in support of breast cancer awareness, is once again offering self-referred or physician-referred screening mammograms for a reduced fee of \$20. The American Cancer Society and the CMH Foundation make this reduced-fee program possible.

To make an appointment, call CMH Centralized Scheduling at **(937) 382-9595** and request to be scheduled for a \$20 screening mammogram.

Patients must be females age 39 and older without symptoms. Those with symptoms, such as lumps, need to be physician-referred for a diagnostic mammogram. The patient cannot be breastfeeding and cannot have had a mammogram within a year. Women with a fibrocystic breast condition qualify for screening mammograms, as do women with augmented breasts. Pregnant women do not qualify.

This is a self-pay program. Patients pay at the time of the exam with cash or check. Cost includes the exam and the radiologist's interpretation fee. Patients must provide a family physician or gynecologist's name in order for a report to be sent to their office. A letter of report will be sent to the patient's house within four working days.

Patients are asked to wear a two-piece outfit to make changing into the gowns worn during the exam less difficult. Patients should not wear underarm deodorant on the day of the exam.

CMH's board-certified radiologists perform double reads on the mammogram results. One radiologist interprets the mammogram in the morning, and another radiologist reads it again later in the day so that patients automatically get a second opinion. CMH is accredited by the American College of Radiology.

LEAVING THE HOSPITAL

—Continued from page 7

organizations to stay current with the resources available.

"The hospital allows us [social workers] to spread out, and make connections and keep up-to-date," she says. "We act as part of the community to provide a healthy home for patients."

SUPPORT FOR MOTHERS Many of CMH's managerial and clinical staff find it important to develop positive working relationships with the agencies providing the resources. CMH Mother-Baby Care Manager Kathy Dye can recall several recent instances where the Help Me Grow program helped new mothers in need of financial, emotional and ongoing clinical support.

We want patients leaving the hospital to stay at their ultimate level of health.

Help Me Grow is a program for infants and toddlers from birth to 3 years who have or are at risk for developmental delays or challenges with growth and development. Help Me Grow staff members work with children and families to provide assessment, support, information and referrals, home visits and linkage to other community resources.

The program is offered to every new mother. "We've got a great working relationship with them," says Dye. "We're able to get people into the system earlier for a better outcome."

Providing links to community resources allows CMH Regional Health System to ensure uninterrupted, needed services for many patients.

"I always feel better if we get several supports set up and patients can be successful at home," says Roth.

Leslie Woten, who wrote this story, is a Wilmington High School graduate and a senior at Ohio Northern University, where she is majoring in communication arts.

COMMUNITY HEALTH CALENDAR



Now More Than Ever.

For more information on these programs, call the Community Health Enhancement and Education Referral (CHEER) telephone number at **(937) 382-9606** unless another number is provided.

CLASSES

*These classes are taught by CMH's professional prenatal educators.

Big Brothers/

Big Sisters Class*
Offered every other month.

Breastfeeding Class*
Offered every month.

Early Pregnancy*
Offered every other month.

Heartsaver CPR and CPR for Health Care Providers

Courses are taught by CMH's certified CPR educators. Heartsaver is offered three times per year and Health Care Providers nine times per year.

Infant Care*
Offered monthly.

**Infant Safety
and CPR***
Offered quarterly.

New Dads Class

Offered quarterly by an experienced CMH dad.

Outpatient Diabetes Class

Taught by CMH's certified diabetes educators. Classes or individual instruction by

appointment. Call **(937) 382-9307**.

Postpartum Class*
Offered every other month.

**Prepared
Childbirth Series***
Offered monthly except in December.

**Teen Prepared
Childbirth***
Offered three times a year.

**Weekend
Prepared Childbirth***
Offered five times a year.

PROGRAMS/SERVICES

**Advance Directive
Counseling**
Offered weekly by CMH trained professionals who will assist with completion of forms.

Child Safety Seat Inspections

Offered monthly and by appointment. Installation of current seats in vehicles will be checked. *Free seats available to those meeting financial guidelines.*

Corporate Health Services

Offers a full line of occupational health, workers' compensation and rehabilitation services. Mobile unit available. Call **(937) 382-7785**.

HealthSense for Seniors

A monthly health education program/luncheon for seniors, sponsored by the CMH Foundation.

Lactation Services

Offers a range of services to breastfeeding mothers. Call Renee Quallen at **(937) 283-9882**.

Look Good... Feel Better

A monthly program in conjunction with the American Cancer Society designed for women undergoing cancer treatment.

SUPPORT GROUPS

Adult Diabetes Support Group

Facilitated monthly by CMH's diabetes educators. Call **(937) 382-9307**.

Breastfeeding Support Group

Facilitated every month

by CMH's professional prenatal educators.

Clinton County United Ostomy Association Support Group

Meets monthly and offers support to people with ostomy and their families. Call **(937) 685-5681**.

Fibromyalgia Support Group

Meets monthly and offers support to people with fibromyalgia and/or pain-related chronic diseases.

Insulin Pumps Support Group

Meets quarterly for people using or interested in using an insulin pump to manage their diabetes. Call **(937) 382-9307**.