

SPRING 2006

Health Connection

THE MAGAZINE OF EVANSTON REGIONAL HOSPITAL

**Good day,
sunshine!**
Greet the day
with an SPF

**Bouncing back
from joint pain**

Fire up the grill!
But read these
food-safety tips first

Good day, sunshine!

Greet the day with an SPF

You don't have to be a sun worshipper to take sun protection seriously—even limited exposure can cause damage. Skin cancer is the most common kind of cancer in the United States, affecting nearly half of all Americans who live to age 65. Although most cancers don't appear until after age 50, skin cancer results from years of accumulated sun damage. However, you can avoid sun damage and enjoy your favorite outdoor activities by taking sensible precautions and using a sunscreen that protects your skin from damaging ultraviolet rays.

THE ABCS OF SPFS

Sunscreen products are rated according to their sun protection factor (SPF)—the length of time a product will protect you from sunburn caused by ultraviolet B (UVB) rays. But sunscreens don't provide complete protection. You still need to be cautious about timing and limiting your sun exposure.

Your best bet when shopping for a sunscreen is to choose a product with an SPF of at least 15, according to the American Cancer Society. Check the label to make sure it provides “broad-spectrum” protection, which protects against UVB rays and ultraviolet A (UVA) rays. UVB rays cause sunburns that can lead to superficial skin cancers known as basal cell carcinomas and squamous cell carcinomas. They can also lead to the more deadly skin cancer, melanoma. UVA rays penetrate even more deeply into the skin, damaging connective tissue.

SAVE-YOUR-SKIN TIPS

If you'll be outside, slather on sunscreen and find a shady spot, but keep in mind that sunlight reflects off surfaces such as water, sand and pavement. Avoid the sun between 10 a.m. and 4 p.m., when rays are strongest. To block sunlight,



wear sunglasses, a broad-brimmed hat and clothing made from tightly woven fabric, preferably long-sleeved shirts and pants. For your sunscreen to be most effective:

- Apply about 30 minutes before going outdoors.
- Use liberally. Apply 1 ounce of sunscreen to cover all exposed areas of your body, including your neck, ears and scalp.
- Reapply every 90 minutes—more often if you sweat heavily or go swimming.
- Use even on cloudy days—UV rays can still reach you.

Harmful UV rays can pass through car windows, too, so apply sunscreen to exposed skin if you'll be driving during peak sun hours.

Make applying sunscreen a habit—like brushing your teeth—but don't rely on sunscreen for full protection against skin cancer. Be sure to examine your skin each month for unusual changes and see your dermatologist if you spot any irregularities.

“When outside, apply sunscreen liberally every 90 minutes.”



Bouncing back from joint pain

With all the wear and tear we place on our joints, it's no wonder that almost 639,000 people underwent hip or knee replacement surgery in 2003, according to the Centers for Disease Control and Prevention. Knees and hips, in particular, are prone to problems—largely because they play a part in almost everything we do—but shoulder, finger, ankle and elbow joints can need replacement as well.

WHY ARE JOINT REPLACEMENTS NEEDED?

Joint replacement surgery, also known as arthroplasty, becomes necessary when conditions such as arthritis destroy the cartilage that cushions and separates bones. Over time, the friction of bone against bone wears away the joint, causing it to become stiff and painful.

Additionally, sports-related injuries and falls can create the need for surgery. Generally, arthroplasty becomes an option when joint pain disrupts your daily routine.

GETTING NEW PARTS

Surgeons can create a new joint, relieving your pain and providing greater freedom of movement. During the procedure, destroyed bone and tissue are removed and replaced with prosthetics, or artificial parts. The parts are made from durable metal, plastic or ceramic and can last up to 20 years.

Newer minimally invasive techniques are being performed more often, using smaller incisions—just 3 to 5 inches, compared with 6 to 12 inches in standard procedures—and reducing recovery time. Your hospital stay may be reduced to one or two days from four or three, and some patients go home the same day as surgery. However, minimally invasive surgery is not for everyone; patients who are overweight, elderly or frail or who have bone abnormalities do not make good candidates.

With hip or knee replacement surgery, expect to use a walker, crutches or a cane initially after the procedure. As you recuperate, a physical therapist will help you perform exercises to strengthen the joint, guiding your movements so you don't accidentally dislocate the replacement. Barring the unforeseen, you should be walking unassisted two to six weeks later. And though grueling workouts like 10-mile runs may still be too tough for artificial hips or knees, make plans to resume long-lost activities like dancing or strolling on the beach within six months.



Do you need joint replacement surgery?

Your overall health and age and the condition of your joints will help you and your healthcare provider decide whether you're suitable for joint replacement. If you can answer yes to any of the following questions, you may want to consider surgery.

- Are you still in pain even after losing excess weight?
- Does your pain keep you awake nights?
- Does your pain interfere with your ability to earn a living?
- Has your quality of life suffered because of your pain—your ability to travel, perform household chores or visit with friends or family?
- Have you exhausted all other options, including anti-inflammatory drugs to relieve joint pain, walking with a cane, power-walking or swimming instead of jogging?



A special welcome

Ben Quinton is Evanston Regional Hospital's new CEO

We're thrilled to welcome our new chief executive officer, Ben Quinton, to Evanston Regional Hospital. Quinton replaces former CEO Cliff Park, who departed in October, and Pete Petruzzi, who served as interim CEO until March. The hospital staff is excited to have Quinton take over the reins to begin working for the hospital's continued growth and advancement.

ABOUT BEN QUINTON

The fifth of seven children, Quinton was born and raised in the Puget Sound region near Seattle, Wash. He attended Brigham Young University (BYU) in Provo, Utah,

where he earned a degree in psychology. While at BYU, Quinton served on a humanitarian mission in Santa Rosa, Calif., for two years. He and his wife, Cathleen, a fellow BYU student, have been married for 15 years and have four children: Rosemary, 12, Jeffery, 10, Nathan, 5, Abigail, 2 and a fifth child due this spring.



Ben Quinton, CEO

A DEDICATION TO THE HEALTHCARE INDUSTRY

Quinton has an extensive background in healthcare management and administration. After earning a Master of Health Administration degree from the University of Missouri-Columbia in 1996, he worked as a practice management consultant,



providing financial and management expertise to hospitals and medical groups. He then served as the executive director of physician practice administration at Hays Medical Center, a 192-bed tertiary care hospital in Hays, Kan. While there, he worked directly with the CEO and senior management team.

The experience and skills Quinton gained at Hays Medical Center would serve him well in February 2003, when he was named CEO of Rooks County Health Center, a nonprofit, 25-bed critical access hospital in Plainville, Kan. As CEO, Quinton expanded hospital services and increased revenues by more than \$2.5 million by the end of his third year. He also prepared the hospital for HUD funding on a \$15 million replacement facility, an achievement he considers to be his greatest professional accomplishment.

While Quinton says he'll greatly miss the Plainville community, he and his family wanted to move closer to relatives

in the West, which is what brought him to Evanston.

A HIGH STANDARD OF EXCELLENCE

Quinton brings a proven track record of excellence to Evanston Regional Hospital, as well as a love for what he does. Healthcare is in his blood, and it shows. Most important, Quinton is both an outstanding team player and team leader.

Former employees can attest to Quinton's exceptional management style. "He's a great team leader," says Julie Price, CFO of Rooks County Health Center. "The hospital has grown so much under his leadership." Adds Radiology Director Bill Stahl, "Quinton is a great communicator. He's also a great motivator and thinks outside the box. He has great confidence and leads naturally."

Quinton, for one, says he's very excited to put his own stamp on Evanston Regional Hospital. He's looking forward to the many opportunities that come from working at for-profit hospitals, and believes he's up to the challenge.

Evanston Regional Hospital is glad to have Quinton at the helm, and looks forward to the bright future we're sure to have in the coming years.

2005 Community Report

Admissions	1,444
ER visits	9,082
Surgeries	1,886
Outpatient registrations	51,132

FINANCIAL BENEFITS

Payroll (190 employees)	\$5,739,404
Capital investments	\$663,208
Property and sales taxes	\$136,363

CARING FOR OUR COMMUNITY

Charity and uncompensated care	\$682,089
Support education	\$40,170
Health education	\$9,177
Donations to local charities	\$6,313
Total Community Investment	\$7,276,664*

* Dollar amounts are approximate

WORKING FOR A HEALTHY COMMUNITY

Evanston Regional Hospital is committed to making our community a better place to live and work. Here are some of the ways we're helping Evanston stay healthy:

Physicians recruited

- podiatrist
- two pediatricians
- dentist

Expanded services

- new ICU unit
- new telemetry unit
- new CT scanner
- new nurse call system
- new adenosine stress testing
- new gastroesophageal reflux disease (heartburn) testing

HEALTHWISE QUIZ

How much do you know about ADHD?

Take this quiz to find out how much you know about attention deficit hyperactivity disorder (ADHD).

- 1 Which of the following is *not* a symptom of attention deficit hyperactivity disorder?
 - a. hyperactivity
 - b. obsession
 - c. impulsivity
 - d. inattention
- 2 ADHD is thought to be caused by:
 - a. poor parenting
 - b. a genetic disorder
 - c. rheumatic fever
 - d. all of the above
- 3 Other disorders may accompany ADHD in as many as one in three cases. These include:
 - a. Tourette's syndrome
 - b. learning disabilities
 - c. bipolar disorder
 - d. all of the above
- 4 Most children who have ADHD begin to show signs and symptoms of the disorder between ages:
 - a. 1 and 2 years
 - b. 4 and 6 years
 - c. 9 and 12 years
 - d. 13 and 15 years
- 5 Adults can also suffer from ADHD. To be diagnosed with the disorder, a person must:
 - a. have shown symptoms of ADHD in childhood
 - b. have suffered from a serious illness as a child
 - c. have trouble holding down a job
 - d. be a reckless driver

ANSWERS: 1. B; 2. B; 3. D; 4. B; 5. A



STROKE SMARTS

How to spot a stroke

A stroke is similar to a lightning strike—it can happen suddenly and without warning. However, there are sometimes warning signs that lightning is imminent, such as storm clouds, rain and thunder.

Warning signs can signal a stroke, too. If you spot them and act quickly, you may prevent severe disability or death. If you or someone around you show any of these symptoms, seek emergency medical treatment immediately:

- sudden numbness or weakness in the face, arm or leg, especially on one side of the body
- sudden confusion, trouble speaking or understanding
- sudden trouble seeing in one or both eyes
- sudden trouble walking, dizziness, loss of balance or coordination
- sudden, severe headache with no known cause

These signs point to a stroke in progress. Blood and oxygen are not getting to a part of the brain as a result of a burst blood vessel or a blood clot, and that portion of the brain begins to die. Speedy medical care may minimize brain damage.

RISK FACTORS

Lifestyle factors and other health conditions that weaken blood vessels or contribute to blood clots increase your risk for stroke. You can control or treat some of them, such as high blood pressure, smoking, diabetes, carotid or other artery disease, abnormal heart rhythm, transient ischemic attacks (mini-strokes), certain blood disorders, sickle cell disease, high blood cholesterol, high triglycerides, physical inactivity, obesity and substance abuse.

Factors you can't change include increasing age, gender (more men suffer strokes), family history, race (African-Americans face greater risk) and having had a prior stroke or heart attack. Talk to your doctor about ways to reduce your risk for stroke and be prepared to act quickly if warning signs appear.

Outward bound

10 play-safe tips for your kids



What's one of the best things to say to your child? Go outside and play! Close supervision, proper protective gear and these simple precautions will help your kids safely enjoy the great outdoors:

- 1 Apply a sunscreen with an SPF of at least 15 every day—even on cloudy days—and reapply every 90 minutes, especially after swimming or sweating.
- 2 Outfit kids with brimmed hats and don't forget the sunglasses.
- 3 Keep babies under age 6 months out of direct sunlight and in the shade.
- 4 Avoid using swimming aids such as "floaties." They don't substitute for a life vest and can give kids a false sense of security.
- 5 When kids are swimming, keep a portable phone and rescue equipment like a shepherd's hook and life preserver nearby.
- 6 Supervise kids at all times near water and stay within arm's length of babies and toddlers. If you have to step

away even for a moment, get everyone out of the pool area and take little ones with you.

- 7 Insist kids wear proper protective equipment, especially a helmet, wrist guards and knee and elbow pads when bicycle riding, skateboarding and in-line skating.
- 8 Teach kids to bike skillfully. Enroll your children in a class to practice basic skills, such as balance and braking, on a smooth surface away from traffic.
- 9 Visit playgrounds that have soft surfaces like wood mulch or chips, shredded rubber tires or sand to lessen the impact of falls. Avoid play equipment on asphalt, concrete, packed dirt and grass.
- 10 Don't let kids wear helmets, necklaces, backpacks, scarves or clothing with drawstrings while on playgrounds.



Fire up the grill!

But read these food-safety tips first

For many people, summertime fare means fresh, fast, no-fuss meals cooked outdoors. However, warm temperatures can set the stage for a nasty bout of food poisoning. Take these

precautions to make sure your meals are safe:

- **Defrost thoroughly.** Place frozen foods in the refrigerator for safe thawing. If meats are out too long, bacteria can produce illness-causing toxins that remain active even during cooking.
- **Marinate right.** Keep foods refrigerated while marinating.
- **Transport safely.** When traveling, use an insulated cooler with enough ice or cold packs to maintain a temperature of at least 40° F. Wait until you're ready to leave to

pack refrigerated foods in the cooler. Then place it in the coolest part of the car—not the trunk. When you arrive at your destination, move the cooler into the shade, avoid opening it frequently and replenish ice as needed.

- **Bring extra plates and tools.** Use one platter and spatula, tongs and sauce brush for raw foods and a different platter and utensils for cooked foods. Don't use a fork to turn meats since puncturing can introduce surface bacteria into the meat.
- **Keep clean.** Bring paper towels and disposable wipes or a sanitizing gel for convenient hand washing and surface cleanup.
- **Prepare the grill.** Light the coals and allow the cooking surface to heat up to kill microorganisms before putting on the food.

Is it done?

Use an instant-read meat thermometer to test meat's doneness. Grill precooked meats such as hot dogs to 165° F until steaming hot. Refer to the chart at right to determine when cooked meat is safe to eat.

Meat product	Safe temperature
poultry	180° F
pork	160° F
beef, ground	160° F
beef, steaks or roasts	145° F
veal	145° F
lamb	145° F

PHYSICIAN PROFILE

Dr. Gustafson's medical specialties include general surgery, general thoracic surgery, GI endoscopic surgery, laparoscopic surgery and thoracoscopic surgery. He is currently seeing patients at Arrowhead Surgical Clinic, 196 Arrowhead Drive, Suite 9, in Evanston. Call **(307) 783-8280** to make an appointment for a consultation today.



ARROWHEAD
SURGICAL CLINIC

PAUL GUSTAFSON, D.O. **General Surgery**

Evanston Regional Hospital is pleased to welcome Paul Gustafson, D.O., to its medical staff. Dr. Gustafson specializes in general surgery and comes to Evanston Regional from Unity Hospital in Muscatine, Iowa.

A Chicago native, Dr. Gustafson received his medical degree from the Chicago College of Osteopathic Medicine and performed his surgical internship at Brooke Army Medical Center in San Antonio, Texas. After completing his internship, Dr. Gustafson took a United States Army flight surgeon course and was a clinic commander at Rock Island, Ill. He completed a general surgery residency at Marshfield Clinic in Marshfield, Wis., and a thoracic fellowship at Wayne State University in Detroit, Mich.

Dr. Gustafson is very excited about coming to Evanston Regional Hospital and looks forward to putting his skills and talents to use for the people of Southwest Wyoming. When he isn't tending to patients, Dr. Gustafson enjoys skiing, fishing, golf and cooking.

Need a new doctor?

Search our physician directory online at www.evanstonregionalhospital.com.

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