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# Commitment to **EXCELLENCE**

NEWSLETTER *Spring* 2010



The Schetter family pays a special visit to HVCH to thank staff members who helped save their daughter's life.

## A DAY IN A LIFE

Lillian Anne felt cold in her mother's arms, and she would not warm up. She was losing her color, and her little heart was racing. Her breathing was labored when they arrived in the Emergency Department at Hocking Valley Community Hospital. *(continued page 4)*

## Meeting the Challenge



President and CEO LeeAnn Lucas-Helber speaks directly to the issues affecting HVCH and the community.

WE ARE FOCUSED ON MAKING A DIFFERENCE IN OUR COMMUNITY DESPITE THE ECONOMY, HEALTHCARE REFORM, AND THE MANY CHALLENGES WE FACE EVERYDAY.

At Hocking Valley Community Hospital, we remain focused on our foundation to work as a team to reprioritize needs in an effort to reduce cost and preserve jobs. We have been forced to delay moving forward with capital projects that will improve our facility due to the overall condition of the economy and the new tax impact. However, I am pleased to share with the community that to date, we have not laid off employees. We have actually expanded services in our Urgent Care and added staff in some areas.

Through the generosity of our Auxiliary, we were able to acquire much needed state of the art patient monitoring equipment in our Emergency Department. The equipment has made a tremendous difference for our staff, physicians, and ultimately our patients.

We are very eager to move forward with plans to improve our facility and continue our migration to an electronic medical record. These are challenges that I look forward to because they will have a significant impact on the way we serve you. The changes will enhance patient care, efficiency, and communication.

I am proud of the progress we have made at the hospital, and I am excited about our future. I am proud of our staff and grateful for their willingness to work as a team to overcome hurdles and challenges. Together we are making a difference in our community. Thank you for your continued support of Hocking Valley Community Hospital.

Everyday I receive a wide variety of communications from magazines, newspapers, emails, radio, and television. Depending on the reporting source on any given day, our economy, country, or healthcare is facing a crisis.

There is no question that we will always face challenges personally, professionally, and particularly in healthcare. The test is how we accept and approach the challenge. I can assure you that your hospital is focused and building on a strong foundation. We are focused on making a difference in our community despite the economy, healthcare reform, and the many challenges we face everyday.

The new tax on Ohio hospitals has had a significant impact on hospitals across the state. Many hospitals have been forced to delay projects and facility improvements, do without needed equipment, discontinue services, and even let valuable clinicians and professionals go to accommodate the new tax burden.

### UPCOMING EVENTS

**Community Wellness Fair, Saturday April 24**

Logan High School, 11:00 a.m. to 3:00 p.m.

**Kidpalooza, Thursday, May 13**

Logan-Hocking Activity Center, 10:00 a.m. to 2:00 p.m.

**Employee Recognition Dinner, Thursday, May 20**

**50th Anniversary HVCH Auxiliary, Tuesday, June 8**

For more information online, go to [www.hvch.org](http://www.hvch.org), click on News, then Events.

**HVCH Wellness 5K Walk/Run, Saturday, July 3**

Hocking County Fairgrounds, Race starts at 9:00 a.m. Pre-register by June 29 to receive t-shirt. Call 380-8219.

**HVCH Foundation Auction, Friday, July 16**

Brass Ring Golf Club, Social Hour starts at 5:00 pm. For more info, call the Foundation, 380-8110.

**25th Anniversary Golf Outing, Saturday July 17**

Brass Ring Golf Club Four person scramble, two tee times. Call the Foundation, 380-8110.

## Lew Newberry Named Chief Financial Officer



Certified Public Accountant Lew Newberry brings 25 years of hospital financial and management experience to HVCH.

Lew Newberry recently joined HVCH as Chief Financial Officer. Mr. Newberry is a Certified Public Accountant with 25 years experience in hospital finance and management.

LeeAnn Lucas-Helber, President and C.E.O. at HVCH, made the announcement to hospital employees saying, "We are

fortunate to have someone of Lew's skills joining our organization, especially at this time. With his financial expertise and his understanding of the culture at HVCH, he will fit right in."

A native of Parkersburg, WV, Mr. Newberry earned a bachelor's degree in Accounting from Oklahoma Christian University, and was Senior Auditor with Ernst and Young prior to entering the field of healthcare. As a hospital executive, he has been responsible for clinical and operational activities, in addition to accounting and finance.

While working in West Virginia, Mr. Newberry was responsible for acquiring accreditation for the first critical access hospital in the state.

His professional affiliations include the American Society of Certified Public Accountants and the American College of Health Care Executives. Mr. Newberry completes 40 hours of continuing education annually in healthcare and finance-related coursework.

## IT Prepares for the Future

When electronic Health Information Exchange becomes truly viable, HVCH will be ready. In preparation, the Information Services department is updating hospital information systems and software.

"True widespread Health Information Exchanges and the sharing of electronic health records (EHR) systems are just over the horizon," said John Burgess, C.N.A., M.C.S.E., Director, Information Services at HVCH. "Hardware and software companies are poised and ready to offer new products to address detailed federal guidelines as they are issued. Federal regulations will certainly affect the timing of investment in this technology, but patients are always our first priority."

It should be noted that federal mandates for record-keeping and reporting are separate from issues related to health insurance coverage.

Strong relationships with vendors and other outside resources help HVCH apply emerging technologies to patient care and contribute to operational efficiency.

Mr. Burgess commented on other technology-related initiatives at HVCH.

**On cardiac monitors:** "The new cardiac monitors are used within our telemetry system. They are feature-rich



John Burgess leads a two-stage initiative to update HVCH hospital information systems.

and should be very reliable. The manufacturer provides ongoing servicing but we will provide first-response services, if needed."

**On Insurance Verification:** "During registration, patient insurance information will be relayed to a data hub over a secure, high-speed connection. Insurance databases, including Medicare and Medicaid, will be queried electronically, and the information will appear on the registrar's computer in a matter of seconds."

**On EMR:** "Anticipating the changes that are coming, we are currently working on a two-stage plan to update our internal information systems."

## A Day In A Life

Lillian Anne felt cold in her mother's arms, and she would not warm up. She was losing her color, and her little heart was racing. Her breathing was labored when they arrived in the Emergency Department at Hocking Valley Community Hospital.

The special joys of a first child had unexpectedly turned to thoughts of saving their precious daughter's life for Matt and Angela Schetter.

Before starting a family of their own, Matt and Angela had devoted their professional lives to service to others. A general music teacher at Logan Middle School, Matt teaches music and assists with the choir. He also serves as a math intervention specialist. Angela is a Registered Nurse in the Surgery Department at HVCH.

With a child of their own, they doted on her, and cared for her. Now it was up to others to save her.

At six weeks old, Lillian Anne was being treated for a normal cold and an ear infection, but there was no apparent

“WE WANT TO CONTINUE THAT TRADITION BY PRESENTING ROSES TO THE AMAZING, CARING PEOPLE AT HVCH WHO HELPED SAVE OUR LITTLE GIRL AND OUR FAMILY.”  
— MATT SCHETTER

“WE FEEL BLESSED THAT HVCH WAS HERE FOR LILLIAN ANNE, AND FOR US.” — ANGELA SCHETTER

reason for her chest retractions, a heart rate too fast to monitor, and a life-threatening blood glucose level of 16.

What could be wrong with this otherwise healthy infant?

Robert Sivier, M.D., an Emergency Department physician, and the staff were assessing their tiny patient as Dr. Douglas Lawson, OB/GYN, Dr. Mark Scarmack, Pediatrician, and nurses from the Family Birth Center rushed to the Emergency Department. A mobile intensive care unit from Nationwide Children's Hospital had been dispatched.

After respiratory treatments and medication, breathing improved and color returned. An EKG confirmed a diagnosis of supraventricular tachycardia (SVT), a condition that may occur without warning in infants with otherwise normal hearts.

When the team from Children's Hospital arrived, Lillian's heart rate remained at 350 beats per minute. In order to make Lillian stable for transport, the team needed to get her heart rate down. A single shock (cardioversion) from a defibrillator returned her heart to a normal sinus rhythm.



Present for the “reunion” with Lillian Anne were L-R: Bryan Brown, R.T., Cardiopulmonary Dept.; Stacey Gabriel, R.N., B.S.N., Director, Emergency and Urgent Care Services; Dawna Evans, R.P.h., Director, Pharmacy; Dr. Doug Lawson, OB/GYN; Matt Schetter, Angela Schetter, holding Lillian; Dr. Mark Scarmack, Pediatrician, Dr. Robert Sivier, Emergency Dept.; Mindy Davis, R.N., Family Birth Center; Donna Webb, Phlebotomist, Laboratory; Michelle Matheney, R.N., Family Birth Center; and Cassie Thompson, Phlebotomist, Laboratory.



The special joys of a first child and her precious life are evident on the faces of Matt and Angela Schetter.

She was placed on a ventilator, and immediately transported to Children's.

Angela and Matt Schetter spent the next few days at Children's Hospital where their daughter was given medication, and was constantly monitored while she rested quietly.

The staff at Children's Hospital told the Schetters that they had never seen a SVT patient as young as Lillian Anne, and further diagnosed her with Wolff-Parkinson-White Syndrome, a rare (in infants) type of heart condition where the electrical conduction misfires and causes SVT.

After returning home, the family had another scare, prompting a return to the Emergency Department at HVCH. An adjustment in medication corrected the problem.

As for the prognosis, Lillian Anne will have periodic check-ups, and her medication will be adjusted as she grows. It is possible that her heart will correct itself. Other treatment options will be available, as she gets older.

After things got back to normal, Matt, Angela and Lillian Anne Schetter invited everyone who helped stabilize and treat Lillian Anne to a reception in the hospital lobby (see photo).

Explaining that a "thank you" just doesn't seem adequate, Matt said, "Roses are usually given on special occasions, and we want to continue that tradition by presenting roses to all of you as symbols of our deep appreciation. All of you are amazing, caring people, who helped save our little girl, and our family."

Angela shared her gratitude to her co-workers by saying, "When the situation is reversed, excellence in patient care takes on a whole new meaning. We feel blessed that HVCH was here for Lillian Anne, and for us."

## In Their Own Words

Angela Schetter and Stacey Gabriel reflect on *A Day In A Life*.

**Angela:** A mother's instincts told me something was wrong. As a nurse, I knew Lillian Anne needed emergency care.

**Stacey:** The baby's color and respiration signaled a very serious situation. We called her physicians, the Family Birth Center, cardio-pulmonary, and X-ray — STAT!

**Angela:** In an instant, familiar faces were all around us.

**Stacey:** Nurses from the Family Birth Center quickly started an IV, placed the baby in an incubator, and put her on a neonatal cardiac monitor.

**Angela:** The staff kept her under control. It was a real team effort.

**Stacey:** Lillian Anne's heartbeat was too rapid to monitor. We were finally able to get an EKG, the doctors diagnosed SVT, and we began treatment.

**Angela:** It was such a relief when her breathing improved and her color returned.

**Stacey:** We were not getting the results we wanted from the medications, but we kept her stable until Children's mobile intensive care unit arrived.

**Angela:** Time was impossible to judge.

**Stacey:** Lillian was connected to the transport's cardiac monitor. To stabilize her heart rate, it was necessary to deliver one shock from the defibrillator. She instantly went from SVT to Normal Sinus Rhythm.

**Angela:** The transport team was impressed with the care Lillian Anne received. I knew the people I work with had saved our daughter's life.

**Stacey:** In fifteen years as a nurse, I had never seen a neonatal defibrillation.

**Angela:** Parents should watch for changes in temperature, color, respiration, pulse and behavior. Be protective, and learn basic CPR.

*Angela Schetter, R.N., has been at HVCH for five years. For the past three years, she has worked as a surgical nurse.*

*Stacey Gabriel, B.S.N., R.N., Director, Emergency and Urgent Care Services has been at HVCH for fifteen years.*

## Colonoscopy Helps Detect A Common Cancer

Did you know that, excluding skin cancers, colorectal cancer is the third most common cancer diagnosed in both men and women in the United States? One hundred six thousand one hundred (106,100) new cases of colon cancer and forty thousand eight hundred seventy (40,870) new cases of rectal cancer were estimated by the American Cancer Society in the year 2009 alone.

Having a colonoscopy is a way to provide early detection and treatment of these types of cancers.

Most men and women should plan to have their first colonoscopy at age 50, and every 5-10 years thereafter, but your physician may make other recommendations based on your medical history and risk factors. Some of these risk factors include:

- Age
- Alcohol Use
- Diet
- Family History
- Inactivity
- Inflammatory Bowel Disease
- Obesity
- Smoking
- Type 2 Diabetes

Overall, the lifetime risk for developing colorectal cancer is about 1 in 19. This risk is slightly higher in men than women.

Colonoscopies can be performed on an outpatient basis at Hocking Valley Community Hospital by Michael Tornwall, MD.

The actual colonoscopy procedure takes, on average, around 30-60 minutes and requires only moderate sedation. The doctor will provide instructions for clearing your colon prior to the procedure. On the day that your

colonoscopy is scheduled, you will come to HVCH's Outpatient Surgery Department where a team of dedicated nurses and surgical technicians will prepare you for your procedure. During that preparation, a registered nurse will take your pulse and blood pressure and start an IV to be used to give your sedation. Most patients state that they do not even remember the procedure, even though they are actually still able to follow simple commands.

After being prepped, you are taken to our Endoscopy suite where the procedure is performed. A long flexible tube is used that sends a picture of the inside of the colon to a video monitor, enabling Dr. Tornwall to visualize the colon, looking for any abnormalities. If a polyp is present, it may be removed or tissue samples can be taken for further study.

Following your colonoscopy, you are taken back to our Outpatient Surgery department where your family member will be waiting to drive you home.

You may contact either Dr. Tornwall or your family physician to schedule a colonoscopy if you experience any of the following:

- A change in bowel habits, such as diarrhea, constipation, or narrowing of the stool that lasts for more than a few days.
- A feeling that you need to have a bowel movement that is not relieved by doing so.
- Rectal bleeding, dark stools, or blood in the stool.
- Cramping or abdominal pain
- Weakness and fatigue.

### PROFILE: MICHAEL SCOTT TORNWALL, M.D., GENERAL SURGEON



Dr. Michael Tornwall is Board Certified in General Surgery. He spent 15 years (1979-1994) at various branches of the University of Texas earning his bachelor's degree and his medical degree, as well as working as a research fellow and surgical resident.

Dr. Tornwall moved his family from Texas to Ohio in 1994, and joined the medical staff at Hocking Valley Community Hospital in 2001. He is a full-time surgeon at HVCH, and also performs several minor surgical procedures in his office located in the Larkman Building Complex, 31500 Chieftain Drive, Suite A in Logan. For appointments call 740-380-1300.

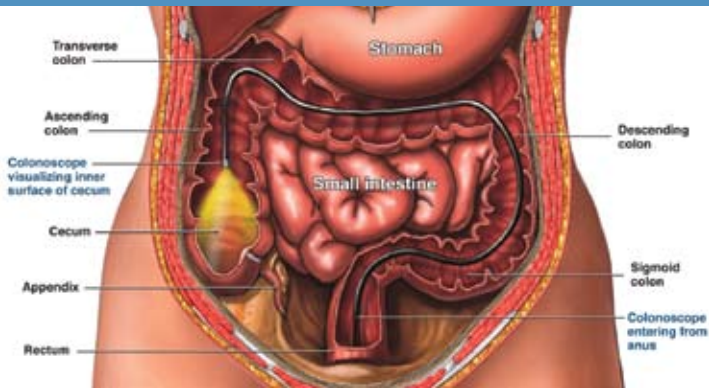


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Most of the symptoms listed are more likely caused by conditions other than colorectal cancer. Still, it is important to see your doctor right away so the cause can be found and treated, if needed.

According to Dr. Tornwall, keeping pace with technology allows the surgery department to provide quality care in cases of emergency as well as for routine screenings. He said, "It is very important to have reliable, accurate equipment on hand at all times. Hocking Valley Community Hospital has shown its commitment to patients and to medical excellence by purchasing new endoscopy equipment which can be used for diagnosis and screening."

The latest generation of endoscopes is now used at HVCH, offering high definition imaging.

You may contact Tara Jacobs, HVCH Director of Surgery, at 740 380 8322, if you have questions about the hospital's surgery department or procedures.

If you or a family member feels that it is time to schedule a colonoscopy, you can reach Dr. Tornwall by calling his office Monday through Friday at 740-380-1300.

## GENERAL SURGERY AT HVCH



Every day, surgical teams perform procedures to help treat or correct existing health conditions. In many cases, the teams help diagnose conditions as they emerge or perform procedures designed for detection.

The physician leading the general surgery team at HVCH is Michael Tornwall, M.D.

Dr. Tornwall is proud of his team members. He said, "The surgical team at HVCH has many years of experience. It is a skilled group of professionals."

In a typical week, the general surgery team will perform a variety of procedures. Some of the most common are:

- Appendectomy
- Bowel Resection
- Breast Biopsy
- Colonoscopy
- Esophagogastroduodenoscopy (EGD)
- Gall Bladder Removal
- Hemorrhoidectomy
- Hernia Repair

"Surgical teams must be proficient in performing a variety of procedures, and be able to perform them in a manner that is safest and most beneficial to the patient," said Tara Jacobs, B.S.N., R.N., Director Surgical Services. Working effectively as a team has led to better outcomes for the patient and to higher levels of patient satisfaction."

## DR. TORNWALL IN HIS OWN WORDS

**On local healthcare:** "I am very pleased with the new endoscopy equipment the hospital recently purchased. The equipment is state of the art, and increases the quality of care provided to our patients. In my nine years here at Hocking Valley Community Hospital, I have had the pleasure of working with an excellent group of talented physicians. We have a good hospital here in Logan. Our Senior Leaders and hospital employees have created a very positive atmosphere for the hospital."

**On the community:** "While there is a big difference between the big cities in which I grew up and Logan, it has become home for my family. We like it here, and it is a safe community."

Dr. Tornwall's wife, Joni, is an E-Learning Coordinator at The Ohio State University. Their daughter, Katherine, is a Sophomore at OSU majoring in Computer Science and Engineering. Their son, Jeff, is a Junior at Logan High School.

## Insurance Benefits Verified During Patient Registration

Hocking Valley Community Hospital has installed new insurance verification technology that will allow the Patient Registration staff to provide insurance information during hospital registration. HVCH will have instant access to personal insurance, Medicare, and Medicaid, and will be able to determine benefits, deductibles, and co-payments on the spot.

Verifying benefits up front leads to faster claims processing and reduces the number of claims that are denied. Patients will have a better idea of what to expect insurance-wise.

“Automating the insurance verification process will give our registration staff the opportunity to assist in financial planning with no surprises, and help the patients feel empowered to make informed decisions,” said Julie Grow, B.S.H., M.B.A., Director, Patient Registration. “We are excited to have real time benefit information for our patients and their families for peace of mind when dealing with health issues.”

Patients will be able to take full advantage of the benefits available to them. In cases where patients will be responsible for some or all charges, the registration staff can explain payment options, make arrangements for payments, or provide a referral to a hospital financial counselor.

For security, privacy, and accuracy, all patients should bring insurance cards and photo identification when registering for services. Self-pay and partial-pay patients should be prepared to make arrangements for payment and be aware that a deposit may be required. Patients making payments on the date of service will receive a 15% prompt pay discount. HVCH



Patient Registration Director Julie Grow and Admitting Clerk Elaine Walker test data response time on the new Insurance Verification system.

accepts debit cards, credit cards, checks, and cash. Credit card payments can also be made over the phone.

HVCH Chief Financial Officer Lew Newberry said, “Our ability to provide up to date insurance information is an important service for our patients today and tomorrow. Up front insurance verification and payment also reduces our non-clinical costs in a number of ways, helping us keep prices as low as possible, and focus our resources on quality care.”