When Care Means More Than Cure

Dr. Paul Bergquist, disease expert, investigated by VMH Lyme of Lyme disease? New virus or another case of Lyme disease? Remember or honor a loved one with VMH Investigates... vaccines for all ages. The importance of fitness tips to keep you healthy!

Kupersmith a Resource for Integrative Medicine

HEALING THE WHOLE PERSON

VMH Family Nurse Practitioner, Sheila Kupersmith has completed a Post Graduate Fellowship in Integrative Medicine. The 1,000 hour, two-year distance learning program created by Andrew Weil, M.D. through the Arizona Center for Integrative Medicine, has achieved international recognition as the leading integrative medical education program in the world.

Integrative medicine is defined as healing-oriented versus symptom-focused medicine that takes account of the whole person, including all aspects of lifestyle.

Kupersmith chose to continue her education in integrative medicine because as she put it, “I wanted to be able to do what’s best for my patients. By being more knowledgeable about healing-oriented medicine, nutrition, herbal and dietary supplements, energy therapy and other modalities, I can now be a resource for not only my patients but for other medical providers. I wanted to have more evidence-based research at my fingertips in order to know what works and what is effective.”

Kupersmith has practiced medicine at VMH for 15 years. She works as a medical provider at the VMH Family Practice and Complementary Medicine Clinic located on the first floor of the Vinqua Area Medical Office Building.

North Crawford Schools and VMH Join Forces

A FITNESS FORCE TO BE RECKONED WITH

Educating people on health issues has always been part of the mission of Vernon Memorial Healthcare. That’s why it’s been a natural fit for VMH to partner with North Crawford Schools and the North Crawford Fitness Force, a wellness committee formed by the local school district in 2010. Like the North Crawford Fitness Force, VMH is able to provide opportunities and education that facilitates and supports overall health improvement.

VMH provided a key letter of support to the school district in its attempt to secure federal grant monies to ensure that students become more physically active and make healthy nutritional choices. Earlier this year the district was awarded over 300-thousand dollars for the Carol M. White Physical Education Program (PEP) Grant. Tamara Lown, the PEP Grant’s Director, said without VMH’s support and the support of other community partners, the grant award would not have come to fruition.

The intent of the grant is to promote lifelong habits of health and wellness through North Crawford’s enhanced physical education curriculum and nutrition programs. Lown said the grant will help assure that there is a long lasting partnership between North Crawford schools and VMH.

VMH athletic trainers, personal trainers and dietitians enjoyed the opportunity to work with North Crawford athletes this fall. Judd Eastman, North Crawford Junior High and High School Physical Education Instructor, said athletes found VMH staff knowledgeable and helpful. Along with speaking with parents of athletes about proper hydration, Wellness Center staff assisted North Crawford Fitness Force Pictured Top Row Left to Right: Nate McKittrick, NCFF Chairperson; Judd Eastman, North Crawford Physical Education Instructor; Angie Dahl, VMH Manager of Corporate and Community Health and Wellness; Tarasa Lown, PEP Grant Project Director; Front Row left to right: Brandon Munson, Principal; Kay Teague, Food Service Director; Dr. Dan Davies, District Administrator; Gary Hines, Physical Education Instructor.
athletes with various strength training activities such as the bench press, proper squat technique, and how to continue the good working relationship by involving VMH staff in additional student physical education activities. VMH also hopes to share its resources, staff talents and ideas with Lown and others in the district in helping with the development of a Health and Wellness Fair at the school in the coming year.
a volunteer in 1988 after personally experiencing what a family goes through during the death and dying process. She lost her father to cancer in 1987. Dorschied recognized at that time that it was nice to have a support system outside of the immediate family. Dorschied remembers being told at the age of 17 that she had a gift when it came to comforting the sick. “I’ve developed many friendships as a result of my volunteer work with hospice,” Dorschied said. “I get to experience such love and respect from families at a crucial time in their lives when dying with dignity is so important to their loved one.” Dorschied recalls when hospice began at VMH, “There were two nurses and a group of volunteers, now with a team approach, there is so much more that can be provided to the patient”. Dorschied has taken on much greater responsibilities as a volunteer over the past six months. She has begun volunteering as a chaplain for patients who do not have a spiritual leader in their lives. She attends hospice team meetings and reports to the hospice volunteers if there is a change in their patient’s condition. She also assists David Swasko, MSW with grief group meetings as needed.

VMH Hospice this year celebrates a 30 year tradition of compassionate care. What a tribute that during its 30th anniversary year, the construction of The Bland Bekkedal Center for Hospice Care is underway. This new home for the terminally ill is being made possible by generous contributions from hundreds of donors and a matching gift from Vernon Memorial Healthcare. As the structure begins to take shape, fundraising continues for furnishings and equipment and for an endowment to provide a permanent and stable source of funding for the future. For more information on funding and donor recognition opportunities please contact VMH Hospice Manager Donna Nelson at 637-4362.

Volunteers Judy Gates and Bonita Dorschied work together as auction clerks at a hospice fundraising event from the past.

In Memory of: _____________________________________________________________

In Honor of: ______________________________________________________________

Cookbooks for Hospice Now Available!

If you enjoy cooking, collect cookbooks, or just like to read a good book, we’ve got the cookbook for you!

For $20 you will receive a beautifully bound three-ring binder filled with over 540 recipes submitted by VMH Hospice families, staff, and volunteers. The VMH cookbook committee is pleased to give all profits made from this cookbook to the Bland Bekkedal Center for Hospice Care so families in need of the hospice center may share their final memories with their loved ones in a place of peace and tranquility.

Cookbooks for Hospice may be purchased at the Friends of VMH Holiday Craft Show on December 6, in the VMH Gift Shop, or by calling the VMH Marketing Department at (608) 637-4244.

Friends to Host Annual Lovelight Ceremony

’Tis the season to remember and honor the special individuals in your life. The Friends of VMH will be hosting the annual Lovelight Tree Lighting Ceremony on Monday, December 10, 2012 at 12 p.m. in the Vernon Memorial Hospital Lobby. The Lovelight trees will be lit during the month of December. White lights will be lit on trees in memory of loved ones and multicolored lights will be lit to honor or recognize an individual.

Lovelights may be purchased for $5 per light. If you are interested in honoring your loved one this holiday season, please complete the attached form and return to:

VMH Lovelights, 507 S. Main St. Viroqua, WI 54665
In this issue’s VMH Investigates, Dr. Paul Bergquist from VMH Family Practice & Complementary Medicine has reviewed an article that was brought to our attention from a concerned patient that is an avid outdoorsman. The article, “New ‘Heartland Virus Discovered in Sick Missouri Farmers’” by Yahoo! News Correspondent, Rachael Rettnar, was posted on Yahoo! News on August 30, 2012.

Two men from northwestern Missouri independently presented to their local emergency rooms two years ago with similar symptoms of high fever, fatigue, diarrhea, muscle aches, and low platelet and white blood cell counts.

Both men had been bitten by ticks (in one case multiple bites) 5-7 days before the onset of illness. Liver functions and CRP, a special type of protein produced in the liver that is present during episodes of acute inflammation or infection, were also elevated. Their providers at the time suspected the tick borne bacterial infection, ehrlichiosis. However, all blood tests for that bacteria were negative in both men.

A Lyme-screening test was negative for one of the men, and apparently the other did not have the test done. One of the men developed chest pain in addition to fever to 104 degrees, with irritability. A heart attack was ruled out. Both men were presumptively started on doxycycline, because the symptoms suggested ehrlichiosis, but they did not show signs of improvement.

An infectious disease specialist, Scott Folk, MD, was consulted, and because of the lack of response to treatment, sent blood off to the Centers for Disease Control and Prevention (CDC) for further testing. After 10-14 days in the hospital, they began to improve gradually, and liver function tests and platelets returned to normal. However, there was no evidence of response to antibiotic treatment.

At the CDC, numerous cell cultures and tests were performed on their blood. All tests were negative, except for electron microscopy, which demonstrated phleboviruses, which are related to a recently discovered virus in China that caused severe illness, and in some cases, death. Phleboviruses are carried by sand flies, mosquitoes, and ticks. They are the only tick-borne phleboviruses known to cause disease in humans.

Scientists at the Centers for Disease Control think the men were infected by a new virus, endemic to Missouri, but so far all efforts to find the new virus in any ticks in Missouri have proved fruitless. Laura McMullen, a senior scientist at the viral special pathogens branch of the CDC, says that this is a novel virus, and they have named it the Heartland virus, for the hospital and region in which it was found.

Drs. McMullen and Folk published a report on the virus, with these two case reports, in the New England Journal of Medicine in August of 2012.

In follow-up on these patients, both patients had persistent fatigue and recurrent headaches, one for two years following the infection. Both had short-term memory difficulty and anorexia, which lasted for several months after the acute infection. Two years after the infection, both patients had persistently elevated antibodies to the virus.

There is no known effective treatment for this virus at present.

A potential confusing factor with this new “disease,” is that Lyme borrelia infection was not adequately ruled out. The Lyme test that was done on only one of the patients was negative, but that test is often false negative in the first 3 weeks of illness, sometimes up to 75% of the time.

Many of the symptoms these men had are common to acute Lyme infection (borreliosis). Borreliosis is known to have many co-infections. These bacteria and viruses are often present and introduced with the Lyme bacteria during the tick bite. Normally, the immune system mops up these “hitchhikers” and no symptoms develop in the patient. However, the Lyme spirochete bacteria has proven to independently suppress the patient’s immune system allowing the growth of one or several of the hitchhiker bugs, which develop as co-infections to the Lyme borrelia spirochete.

It is possible that this new phlebovirus (Heartland virus) is yet another example of a co-infection of borreliosis (Lyme disease), taking advantage of the suppressed immune response, to grow and cause symptoms of infection.

The trouble is, which symptoms are caused by the virus, and which are caused by borrelia? The reason it matters is that if the borrelia infection is treated aggressively, the immune system may have a better chance of responding to the virus. It is therefore important in the case of any tick bite to assume Lyme infection is a possibility, and to try to identify its presence with tests such as a western blot, PCR, or culture. Unfortunately, all of these tests can be false negative in the early stages of disease. Therefore, presumptive treatment of Lyme borreliosis may be of benefit to the patient, even in the absence of a positive test and even if the Heartland viral infection or other co-infection is suspected as the primary cause.

The appearance and identification of the Heartland virus as a tick-borne disease emphasizes the current trend of a steady increase in all tick-borne diseases throughout the world over the last decade.

About the Expert
Dr. Paul Bergquist is a family physician, trained at the University of Minnesota, who has worked in the Viroqua area since 1989. He is educated in integrative medicine, including homeopathy, acupuncture, and botanical medicine, in addition to family medicine. He saw his first case of Lyme in 1989, and has since diagnosed and treated hundreds of cases of Lyme disease in this part of Wisconsin, which is one of the hot spots for Lyme disease in the world. He is a member of ILADS, the International Lyme and Associated Disease Society, which is a group that works internationally to investigate and treat Lyme disease throughout the world.
Exercise 1: Kettlebell Goblet Squat

**Step 1:** Start with the Kettlebell pulled to your chest with your elbows at your sides.
**Step 2:** Consciously grip the floor with your feet. They should be about shoulder width apart with your toes slightly pointed out.
**Step 3:** Begin to descend by moving your butt back, pushing your knees outward and slowly pulling yourself down with your hip flexors. Breathe in on the way down. 
**Step 4:** As you get lower, curl the Kettlebell out to counterbalance your weight in order to maintain an upright position and straight back.
**Step 5:** Try to get your elbows between your knees. Hold this position and push your knees out with your elbows to help stretch your hips. Remember to keep flexing your core muscles, pushing your knees out and gripping the floor with your feet.
**Step 6:** To ascend from the bottom position, squeeze your glutes to stand up powerfully while exhaling and return to Step 1. If done correctly, 3-5 sets of 3-5 repetitions should be enough.

Proper form is important! Only descend as far as you can until your lower back starts to round. The depth will vary for each person depending on flexibility and should improve with practice!

Exercise 2: Plank

**Step 1:** Start on a mat with your elbows and toes on the ground.
**Step 2:** Squeeze your butt and abs as hard as you can to straighten out your body.
**Step 3:** Complete the hold by pulling your shoulders toward your feet, driving your heels back and pulling your toes toward your head.
**Step 4:** Flex your butt, abs, shoulders, and ankles as hard as you can for as long as you can. If done correctly, this should be much harder and more effective than a regular plank.

Again, proper form is key, do not let your butt rise too high or sink too low. Keep your neck straight by looking at your hands, not your elbows.

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**TEACHING YOU HEALTH & WELLNESS AT VMH**

Check www.vmh.org for a complete list of classes and health screenings offered by VMH Health Educators and providers. Register online for your next BLS Recognition class or sign up your 11 year old for the next session of Safe Sitter! Questions? Please call 637-4298 for more information.

**HEARTSAVER FIRST AID** $30

The He艺术saver First Aid course provides training in basic first-aid procedures – including the first-aid skills recommended by OSHA – in a format that can be delivered in a single day. It also offers elective modules in CPR, AED, and environmental emergencies. 

The He艺术saver First Aid course is specially designed to train anyone who might be the first to respond in the workplace or community. The course can be tailored to address the needs of a specific workplace or group of employees.

**November 9 • 11:00 a.m.**

**HEARTSAVER CPR**

The He艺术saver CPR course trains rescuers to recognize and treat life-threatening emergencies with adult, child, and infant victims. It includes sections on CPR and relief of choking in adults and children, as well as infant CPR and relief of choking. It supports the He艺术saver CPR course for responders who require a credential for completion.

**November 9 • 11:00 a.m.**

**SAFE SITTER** $40

As a babysitter you take on a very important role. Babysitting can, and should be. But accepting a babysitting job also means accepting the responsibility for a child’s life. Students must be 11 years old by the date of the course to participate.

**December 28 • 9:30 a.m. - 3 p.m.**

**CHILD/BIRTH EDUCATION** $45

Childbirth Education classes present prospective parents with practical lessons on the labor and delivery process as well as breathing and relaxation techniques which can ease discomfort during birth. Included are discussions on nutrition and diet, the use of medication and anesthesia during labor, caesarean birth, post partum emotional and physiological changes, maternal and newborn care after delivery, parenting, and a tour of the VMH Birthing Center.

**January 22 - February 22 • 7-9:00 p.m.**

**BREASTFEEDING IS BEST** $10

Breastfeeding is Best is a course taught by Certified Breastfeeding Educator, Tara Berg. You will learn techniques to make the breastfeeding experience rewarding and healthy for you and your baby.

**November 20 • 6:30-8:00 p.m.**

**PARENT-TOT SWIM** $30

Parent-Tot Swim provides a relaxing, warm water environment for parent-child interaction. Children ages 6 months to 3 years are welcome.

**5 week session: January 10 - February 14**

**5:45-6:30 p.m.**

**VMH SWIM LESSONS** $30

Children ages 3-10 years old will gain the knowledge of pool and water safety while learning how to swim in a safe environment.

**December 3-7**

**4:30-6:30 p.m.**

The following courses are geared toward individuals in the health care field. For complete descriptions and registration information about these courses please visit our website at: www.vmh.org.

**BASIC LIFE SUPPORT FOR THE HEALTHCARE PROVIDER** $40

**November 16, 30 • December 14 • January 11, 25**

**8 a.m. Recognition • 12:30 p.m. Renewal**

**IV TRAINING** $200

**December 7 • 8:00 a.m.**

**NEONATAL RESUSCITATION PROGRAM** $145

**November 1 • 8:00 a.m.**

**PEDIATRIC EMERGENCY ASSESSMENT, RECOGNITION, & STABILIZATION (PEARS)** $80

**November 8 • 8:00 a.m.**

**COMMUNITY CHOLESTEROL SCREENING**

**November 21 • 7:30 a.m. - 9:30 a.m. December 5 • 6:30 a.m. - 7:30 a.m. January 2 • 6:30 a.m. - 7:30 a.m.**

**Total Cholesterol and glucose (non-fasting) Fee: $15**

**Lipid Panel (12 hour fast required) Fee: $30**
Immunization (vaccination) is a way to improve your immune system and prevent serious, life-threatening diseases. Many diseases that cause great harm to infants and children are best treated through prevention by vaccination. For many years vaccines have also been recommended for adults for certain diseases, for example, annual flu vaccines and the pneumococcal vaccine for adults at risk over the age of 65.

In more recent years another vaccine has been developed for adults, Zostavax, otherwise known as the shingles vaccine. This vaccine is Food and Drug Administration (FDA) approved for age 50 or older. The immunization experts at the Centers for Disease Control (CDC) recommend giving it at age 60 or older. The vaccine helps prevent shingles and more importantly the pain that follows shingles. This “post-herpetic” (nerve) pain can be debilitating and difficult to treat. Even people who have previously had shingles benefit from receiving the vaccine on this next episode.

When the vaccine was first developed there was a supply problem which in recent months seems to have been corrected. The vaccine is 60% effective but felt to be well worth preventing an episode of shingles.

Another vaccine that has become important for adults is the Tdap booster. Anyone who has ever had a cut or injury is asked about their “tetanus” status. If greater than 10 years, a tetanus booster would be administered. This booster routinely was a Td, meaning it was a booster for tetanus and diphtheria. It is now recommended that adolescents, young adults and older adults that have not received a Tdap booster receive one. The “ap” stands for attenuated pertussis and is the booster vaccine against whooping cough. Whooping cough is a respiratory illness that causes thick secretions and a typical cough. It is highly contagious. For infants, the illness is very serious and can be deadly. Boosters are recommended for adults, especially pregnant women and their partners, and anyone who spends a lot of time around infants.

There have been geographical areas throughout the country where there have been outbreaks of whooping cough. Wisconsin currently leads the nation for the highest rate of occurrence. Since less than 10% of adults have received their Tdap booster, it’s important to increase this vaccination rate to protect infants. The CDC is also looking at the current vaccine and its effectiveness. Several years ago the pertussis vaccine became “attenuated.” An attenuated vaccine is a vaccine created by reducing the virulence of a pathogen, but still keeping it viable. It might wane in effectiveness sooner than was once thought. The bacteria that causes the disease may have mutated and thus decreased the vaccine effectiveness. Currently the Tdap booster is an important weapon to decrease the incidence of whooping cough but the actual vaccine used may change in the future.
KRISTY WILTROUT NAMED CHIEF OPERATING OFFICER

Kristy Wiltrout has been named Chief Operating Officer of Vernon Memorial Healthcare. Kristy She succeeds Kyle Bak- kam who is VMH’s new CEO. Wiltrout says she looks forward to her new role and meeting the chal- lenges of a chang- ing health care sys- tem. Wiltrout is a graduate of Viroqua High School and the Viterbo School of Nursing. She went to work at Luther- an Hospital in La Crosse right after graduation in 1988

and came to the Nursing Department at Vernon Memorial from 1993-1999. Wiltrout took a job as a clin- ic nurse at the Gunder- sen Lutheran Viroqua Clinic in 1999. She worked there until 2005 when Dr. Brian Woody and Dr. Duane Koons left that practice and joined Hirsch Clin- ic-VMH. Wiltrout came with them and a year later became the Nursing Supervisor for all VMH clinics. Wiltrout was named Manager of Clinical Services in May 2009.

DAN NELSON PROMOTED TO ASSISTANT ADMINISTRATOR, CLINIC OPERATIONS

Dan Nelson has been promoted to As- sistant Administrator, Clinic Operations. Nelson had been the Physical Therapy (PT) Manager since 1989. He joined VMH as a physical therapist in 1986. Nelson obtained his Physical Therapy degree at UW-La Crosse. He did his undergradu- ate studies at Brown University in Providence, Rhode Island. He is a 1979 Westby High School grad.

Nelson said his new role will allow him to help VMH in additional ways be- yond his role as Physical Therapy Manag- er. His change in duties for the organiza- tion, he said, also provides opportunities for seasoned staff to take on more responsi- bilities. Nelson added, “I’m interested in being a part of conquering the challenges that I believe we’re going to face in health care.”

Reflecting on the past 23 years in physical therapy, Nelson said one of the major changes he was involved in was expanding the time that therapists were able to spend with patients. This was allowed to take place due to chang- es in Medicare billing. Not only did this resurrect his career as a thera- pist, he said it also improved the qual- ity of each patient visit and also helped to recruit staff and expand the department. Nelson said he has always appreciated the supportive network of medical providers.

Surgical RN, attended the American Hos- pital Association (AHA) - Hospital Engage- ment Network Conference in Chicago Au- gust 16-17, 2012. This national conference was attend- ed by over 7,000 individuals in the health care field.

Sullivan and Hora presented VMH’s success story on our Catheter Associ- ated Urinary Tract Infection (CAUTI) program that VMH joined in 2012. The goals of this pro- gram are to reduce patient harm by 40% and to reduce readmissions by 20% by December 2013.

Vernon Memori- al’s aim by participating in this important initiative is to adopt strategies proven to prevent health care acquired infections and improve the overall outcomes for our patients. The AHA-Hospital Engagement Net- work gives hospitals the opportunity to collaborate with each other, focusing on the implementation phase of quality im- provement work.

A Great Staff is Our Greatest Strength

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