



The WHC Staff dressed up in 1950's-theme attire for the Foundation Fall Fundraiser Dinner in October.

Part 2. Community Involvement Boosts Success

We would like to extend our gratitude to all of the community members and businesses that have supported the Wishek Hospital and Clinics through our fundraisers this year. Your participation, sponsorships, and donations have allowed the WHC to improve patient care, purchase and update medical equipment, and enhance our facilities. It is people like you that help us fulfill our mission to provide the highest possible standard of health care in a compassionate and professional manner for our region. Thank you for enhancing our communities.

Thank you to all of our employees who have made the fundraisers a success through your planning, organizing and hands-on help at the events. We appreciate your faithfulness to go above-and-beyond your job descriptions to help our hospital and clinics thrive.

We would especially like to thank Prairieview Hospice for their year-end donation to the WHC. The designated funds will go toward the remodeling of a hospital room specifically for patients with life-limiting illnesses. The room will include amenities that provide a more comfortable and welcoming space for patients and their families. Mark Rinehardt, WHC's CEO, says, "We are so grateful for these kinds of gestures from local organizations like Prairieview Hospice that see the long-term benefit of their financial donations."

A Special Thanks

A special thanks to the Wishek Public School and their board members for opening their High School Gymnasium and Facts Room for the Wishek Hospital and Clinic's Wild Horse Sale Breakfast on September 28th. We greatly value our partnership with you in efforts like these that draw our communities together. Thanks to Mrs. Bettenhausen and her class for helping to prepare for the event. Your work made the event a success!



Dr. Suresh Patel

Retiring from Wishek after six years of service

*You will
be missed...*

“Dr. Patel is a great provider, well-liked by staff and patients. He is a rare gentleman who has given excellent care to our community. He is well respected by our midlevels and doctors. We will miss him.” -Mark Rinehardt, CEO.

During his time with us, Dr. Patel has saved many lives and brought countless sick back to health.

Dr. Suresh Patel, MD, WHC’s visiting General Practitioner, is turning in his white coat. He has been commuting from Minneapolis to Wishek once a month since 2007, and at age 68, he says it is time for him to calm down his practice and retire.

The world has benefitted from Dr. Patel’s long medical history. He graduated from medical school in India, worked in Uganda, East Africa, and took his residency in England. From there, he came straight to North Dakota in 1980 where he has been practicing for thirty-four years. He tried retiring in 2003, but “I got bored after one year and that’s when I started driving back to North Dakota (Wishek and Langdon) once a month to practice medicine again,” says Dr. Patel.

During his time with us, Dr. Patel has saved many lives and brought countless sick back to health. He considers his work a hobby; “It’s not a stress for me at all. It’s just like playing golf.” When asked what he will most miss, Dr. Patel didn’t hesitate, “The staff and the patients. You can’t find better people than North Dakotans. They have kept me coming back to this cold weather.” He made it clear that, even though he is retiring, he is available if the staff would ever need help with anything.

The WHC has seen a lot of turnover in the past few years

in our quest to find good doctors. “We have been through a lot of trial and error, but we finally found two excellent new doctors in Dr. Thirumalareddy and Dr. Vegiraju. They both have just passed their board exams, which is quite an accomplishment for any doctor,” stated Dr. Patel.

In his final words to the WHC community, Dr. Patel has positive remarks, “When you need medical care, the Wishek Hospital and Clinics are the best places to go. All of the providers are good at what they do and well trained, and the nursing staff is excellent. Please continue to make these new doctors feel welcomed so that they will stay.”

His retirement plans include visits to the clinic he set up in India fifteen years ago, managing a foundation that provides a college education for students in India, and working on other projects that he began during his medical practice. He and his wife, an OBGYN anesthesiologist, plan on continuing their travels around the world to Russia, Japan, Eastern Europe, and South America.

Thank you so much Dr. Patel for your amazing service to the people in our community. We value you and your time with us. You will be missed.

Judy Janke Receptionist with a Smile

“It’s so good to hear your voice!” is often a phrase Receptionist Judy Janke hears from patients when she answers the phone at the Kulm Clinic.

Prior to working with the Wishek Hospital and Clinic Association, Judy was the Associate Manager of the Commission Team at Prudential in Minneapolis. Originally from the Kulm/Fredonia area, Judy and her husband, Hugo, moved back home in 2001 with plans to retire. It wasn’t long before Judy realized she would not be content staying at home, so she took the part-time receptionist position at the clinic. Twelve years later, Judy continues the job full-time as well as working evening shifts at the local café. Although she is of retirement age, she has no plans of slowing down anytime soon. “I just love working with people,” says Judy.

While her daily tasks include checking in patients, filing, and faxing, Judy’s way with people is her biggest strength, according to Rosemary Hauff, PA-C. “Nobody walks out the door without Judy saying goodbye to them by name. I have never seen her on the phone without a smile. She’s one in a million and always makes time for everybody.”

In addition to the clinic moving locations several years ago, the biggest change Judy has seen since she started is the switch

to Electronic Medical Records.

“I think it’s a good thing for our clinics. I am not afraid to dive in and try something new,” says Judy. This willing spirit goes noticed by other staff members as Judy often wears multiple hats. “There is not a problem she thinks she can’t fix,” says Rosemary. “She is going to give her utmost to try to get it resolved. As an office staff, we are spoiled! As a patient, you are going to walk away satisfied.”

Judy works with Rosemary Hauff, PA-C, Roxanne Krueger, Clinical Technician, and Heidi Entzi, RN. “It’s wonderful. We have a great team.” After being on staff with some of these women since she began, Judy says they have developed a good system. Through her job, Judy recognizes the benefit of patient satisfaction. “It’s a pleasure to be able to help our patients. What I love about my job is that I am in a position to see that patients get the help they need. I want to thank our patients for their patronage and let them know that I enjoy serving them in any way I can.”



Women's Health

WHC's visiting OB/GYN physician, Dr. Rhonda Schafer-McLean has recently started providing care for local women at the Wishek Clinic once a month. Below are her insights into current issues relevant to women, along with information collected from nichd.nih.gov, whijournal.com and mayoclinic.com.

What has been the biggest change in women's health issues in the past 10 years?

"We are more informed consumers now than ever before, and women are asking more questions, which can be helpful and hurtful at the same time," says Dr. Schafer-McLean. As a result, practitioners are taking more time in the exam room sifting out false information and reeducating their patients with the truth about their situation.

What are the biggest risk factors to women's health right now?

Obesity. This is a long-term epidemic that can be fatal due to the estrogen found in women's fat tissue being a direct link to breast, endometrial, and some other cancers in women. According to Dr. Schafer-McLean, obesity is the dividing difference between women's health in our region compared to others, "We like good food. We cook with cream and dough, the comfort foods of the Midwest." The best diet to remedy obesity includes vegetables, fruits, whole grains, high-fiber foods and lean sources of protein such as fish. Healthy diets should also limit foods high in saturated fat, added sugar and sodium.

Gynecologic Abnormal Bleeding. Relating to the lining of the uterus, gynecologic abnormal bleeding symptoms include excessive bleeding and periods that are longer in duration. Gynecologists often use hormonal methods of care (pills, patches, injections, and intrauterine devices) to cure the issue. More permanent methods can include endometrial ablation (a procedure that uses ultrasound waves to burn out the lining of the uterus that eliminate periods), and hysterectomies (the removal of the uterus).

Cardiovascular Issues. Heart disease is the number one cause of death in women and claims approximately 500,000 lives annually. According to Dr. Schafer-McLean, the main reason for cardiovascular issues in our part of the country is sedentary lifestyles. "Although hard work is valued here, cardiovascular exercise is often overlooked," says Dr. Schafer-McLean. She encourages spending thirty minutes in cardiovascular exercise for five days a week in order to maintain a healthy lifestyle. Losing excess weight can lower your risk of heart disease as well as various types of cancer.

Stress Urinary Incontinence (SUI) (loss of urine with laugh, cough, sneeze or vigorous activity) **Urge Incontinence** (strong, sudden urges to urinate), and **Pelvic Organ Prolapse (POP)** (relaxation of pelvic tissue). Causes of these things may come from stress, multiple vaginal deliveries, and deliveries of particularly large children. Triggers include certain activities and food/

drink. Preventions include maintaining a good body mass, healthy lifestyle and Kegel exercises. Some practitioners go to the extent of recommending C-sections instead of vaginal births to try to minimize these issues.

Ovarian and Breast Cancer. There are often genetically related cancers that should be screened in women with a family history of cancer. Women with genetically mutated genes have risks of up to 87% for developing breast cancer and up to 44% for developing ovarian cancer. These cancers are more common in women with relatives who have suffered from pancreatic cancer, breast, or ovarian cancer. The removal of the breasts and ovaries are common procedures used to minimize risk to the normal population.

Mental Health. Depression is the most common form of women's mental health problems. According to a recent survey by the American Psychological Association, almost 50% of all women in the survey (compared to 39% of the men) reported that their stress had increased over the past five years. A recent study found that stress might also reduce a woman's chance of becoming pregnant. Signs of mental health issues include feeling constantly on edge or under assault. Psychologist, psychiatrist, and medical providers can help women take steps to reduce stress and learn to deal with it in healthy ways.

Women's Health Statistics in the United States

- Breast cancer is the leading cancer of women ages 20–59 years old.
- Last year, less than half of women had adequate levels of aerobic activity.
- In 2009-2010, 64% of women were overweight or obese.
- Women are more likely to die following a heart attack than men.
- Worldwide, women live an average four years longer than men.

For all issues concerning women's health, Dr. Schafer-McLean highly recommends visiting your medical provider for regular screenings and taking daily vitamins such as multi-vitamins, calcium, omega-3, and vitamin D. She also suggests further online resources including the following: Mayo Clinic, WebMD, the Cleveland Clinic, and Wikipedia. She recommends TV shows like *The Doctors* and magazines like *Prevention* as good sources of medical information and further study.



Local Woman Receives Treatments to Return Overseas

Growing up in Kulm, Jessica Kusler never dreamed she would one day be going to work overseas. A graduate of Concordia College, Jessica decided to take her career international after taking summer courses in linguistics and literacy at UND. With the support of her parents, Wayne and Susan Kusler, 26-year-old Jessica packed up last September and jumped on a plane.

After being overseas for only a year, feelings of depression and exhaustion took over. A doctor in her host country tested for anemia and checked her thyroid, but everything looked normal. She was diagnosed with depression and took a leave of absence this October to visit home and get further treatment. She was in Kulm's Clinic less than a week later, sitting in the exam room with Rosemary Hauff, PA-C who immediately checked for deficiencies in iron, vitamin B12 and vitamin D. She found Jessica's levels to be extremely low, leaving her body totally deficient of the nutrients she needed. "It's amazing that she knew what to look for right away," said Jessica who was surprised at how quickly she was diagnosed.

With extensive experience in the medical field, Rosemary says, "You have to listen to what people are telling you. That's where I start." After asking questions about Jessica's diet of the foods available in her host country, Rosemary found the source



Jessica Kusler will return to her work with linguistics overseas, stocked with iron and vitamin supplements.

of Jessica's lack of nutrients. She gave her a vitamin B12 shot right away and sent her to the Wishek Hospital to get infusions that pumped 200ml of iron back into her bloodstream. During her treatments for the next three weeks, Jessica experienced what WHC staff strive to do for every patient, "They took great care of me. All of the people I talk with listened to me. I felt like I was valued and that they really wanted me to get better."

Rosemary prescribed Jessica triple doses of iron and vitamins for her to take when she goes back to work in her host country. The day Jessica leaves is up in the air, "If we can see that (the vitamins) are providing the right supplementation, and when she is comfortable with the idea, she can go back," said Rosemary. Jessica is looking forward to returning to her work and life overseas. She has spent a year

learning the majority language that is used in her host country. Upon her return, she will dive in to learning a minority language that does not yet have an alphabet.

When asked how long she plans to stay abroad, she replied, "As long as I can!"

In order to protect Jessica, details about her host country and organization cannot be published. Thank you for understanding. If you have a patient testimony story idea, please contact Jenn Lukens at jlukens525@gmail.com.

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