

WINTER 2022

HEALTHY *TIMES*



Celebrate!

500 
**JOINT
REPLACEMENTS**

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Reflections and future

Joel Beiswenger, President and CEO

Happy new year and salutations! 2022 is finally upon us. After a year of great challenges, I'm proud to say that we've come out the other side much stronger. I want to take a moment to thank the staff of Tri-County Health Care. Throughout 2021, you displayed a level of fortitude that will be remembered for generations.

The pandemic has dragged on far longer than many would have imagined. Every week I wonder what new variant will rear its ugly head and inevitably make its way to rural Minnesota. I also have to keep an eye on the evolving polarization of our pandemic. As tough as things have been, I do have hope. We are stronger together. Any divide can be healed.

I've been reflecting on 2021 a lot lately. Reflection is typical for this time of year, but it feels a little different this time around. When remembering back on the past year, I recall many triumphs but recognize the struggles as well – the frantic phone calls, emergency meetings, and the exhaustion.

I'm glad that our organization pushed forward with vaccination. We still have much work to do but our vaccine team continues to make huge strides in protecting our community. I'm delighted at the progress we have made on our future home. Mortenson is currently sealing our new building so work can then move to the interior. I'm also extremely impressed with our orthopedics team and their constant drive to outdo themselves. They recently completed their 500th joint replacement.

This edition of Healthy Times touches on some of those achievements and hardships. We have much to be thankful for as we set our sights on 2022. This year we will inch ever closer to our goal of transitioning to our new brand, Astera Health. Additionally, by the end of 2022, our new facility should be nearing completion with a tentative move-in date of Spring 2023.

Put your health first this year and beyond. Thank you, and happy new year!

“Put your health first this year and beyond. Happy New Year!”

JOEL BEISWENGER



Staff on COVID-19 pediatric vaccination

The lifesaving COVID-19 vaccine has finally been made available to some of our youngest and most vulnerable. Staff members wanted to share their thoughts and opinions in hopes it would help parents decide to vaccinate their children.

Ben Hess, M.D. Chief Medical Officer

Having your children vaccinated plays an important part in protecting our community. Getting kids vaccinated keeps them in school with the least disruptions. This will give them the most options moving forward.

Laura DuChene, M.D. Chief of Medical Staff

I have heard people say, “very few children get really sick or die of COVID.” This is true of many illnesses, and it's easy to ignore the risk until your child gets seriously sick. My son, Sawyer, was diagnosed with RSV as an infant. Very few children get seriously ill from this virus, but unfortunately, that was not the case for him. I spent



35 days in the hospital with him, three of which he was on a ventilator and nearly died. I chose to vaccinate my children so they are protected. I never want to see one of my children on a ventilator again.

Brit-Awn Hess Exec. Assistant & Admin. Services Manager

It was a pretty easy decision. We just wanted to make sure they had the best possible chance of staying healthy and not spreading the virus to our baby or others. I got the vaccine and was perfectly fine, so I didn't have any concerns with my children getting the vaccine.

FROM OUR PHARMACIST:

Vaccine vs. Monoclonal Antibody Therapy



Monoclonal antibody (mAb) therapy has been in the news frequently and hailed as a miracle treatment by preventing hospitalizations, reducing viral loads, and lowering the severity of symptoms. Essentially, mAb therapy utilizes mass-produced antibodies synthesized in a laboratory. These antibodies act much like the antibodies our bodies generate to fight off infection. These antibodies are designed to detect the spike protein on the outer shell of the COVID-19 virus.

Regen-Cov and Bamlanivimab/Etesevimab were mAb therapies used to treat the delta variant effectively. However, there have been recent changes with the omicron variant taking over as the dominant strain. The main concern is that mutations make most monoclonal antibody treatments (Regen-Cov and Bamlanivimab/Etesevimab) ineffective. The exception is Sotrovimab, which is effective against the omicron variant, but it is in scarce supply. Tri-County Health Care offers Sotrovimab infusions, but there is a limited supply and a prioritization risk scoring system in place. The risk scoring system was developed by Mayo Clinic and is detailed below.

The MASSBP is calculated as follows: (on a scale of 0-24)

- » age 65 years and older (2 points)
- » BMI 35 kg/m² and higher (2)
- » diabetes mellitus (2)
- » chronic kidney disease (3)
- » cardiovascular disease in a patient 55 years and older (2)
- » hypertension in a patient 55 years and older (1)
- » chronic respiratory disease in a patient 55 years and older (3)
- » immunocompromised status (4)
- » pregnancy (4)
- » Black, Indigenous, People of Color (BIPOC) status (2)

“mAb therapy should not replace vaccination efforts. Vaccination is needed to break the chain of infection while helping prevent hospitalizations.”

MARK CARLSON

The vaccine and timing

Monoclonal antibody therapy is one tool medical professionals can use to help those with the highest risk of severe COVID-19. However, it should not replace vaccination efforts. Vaccination is needed to break the chain of infection while helping prevent hospitalizations.

The best time to explore mAb therapy is early on in the progression of COVID-19 symptoms. It is recommended that mAb therapy be administered within 10 days of initial symptoms, but ideally within 5-7 days after initial symptoms. Clinical trials show that Sotrovimab reduces the risk of hospitalization by up to 85%. For some people experiencing moderate to severe symptoms for more than 10 days, sotrovimab may not provide any beneficial effect.

Sotrovimab is given as a 1-hour intravenous infusion. Patients are typically monitored for another hour as a precaution in case there are any allergic reactions.



The road to 500

The arctic wind finally hit Minnesota on the morning of December 6. After a generally mild fall, the winter and all of its wrath hit the rural community of Wadena. Minnesotans are no stranger to the cold, so many still rose for the early Monday morning commute. One individual, in particular, was up before the crack of dawn. Carla Schwantz was scheduled for bilateral total knee replacement surgery at Tri-County Health Care. After numerous consultations and even previous surgeries, she had been anxiously awaiting the day for weeks. She was finally on track to be rid of her knee pain once and for all.

Carla's knee surgery is special, not just because it will give her a new lease on life but because it is the 500th joint replacement performed by the orthopedics team at Tri-County Health Care. Only a year ago, they celebrated their 300th joint replacement. For a year, they have been completing surgeries at an unprecedented rate. Patients working with the team are almost instantly astounded by the professionalism and poise they display with each step of the process. Many of those patients personally credit orthopedic surgeon Ben Robertson, M.D., with their quick recoveries.

Carla's story is somewhat riveting. She has been a float nurse at Tri-County Health Care for five years. She is responsible for supporting clinical staff and helping with a variety of tasks, including vaccinations. She is a nurse, so naturally, she is constantly moving. She needs her legs and joints to be in good working order, but she has been plagued with chronic pain for quite some time. During the past four years, she has received knee and hip injections for her pain issues. In August 2021, she underwent hip replacement surgery at Tri-County Health Care. She was planning to have knee surgery first, but her hip pain became too much to bear.

Her hip surgery was a grand success. What impressed Carla the most was the lack of pain. When she woke from her surgery, her hip pain had seemingly vanished. She stayed in the hospital for one night before being discharged. Shortly after, she started working with physical therapy. In a relatively short time, she recovered with no complications.

“Tri-County all around was superb. Dr. Robertson, the surgical team, nurses and the therapy staff were very caring and answered all my questions in terms I could understand. They took the time to make me feel comfortable with the surgery procedure.”

CARLA SCHWANTZ

Fast forward to her now impending knee surgery. At 6 a.m., Carla laid down in her hospital bed where nurses tended to her. Preparation for surgery is complex but every unique step is completed to ensure the safest and most efficient hospital stay possible. After numerous questions, Dr. Robertson entered the room to do a final consultation. She expressed a bit of anxiety but also a strong desire to return to the things she loves doing without pain. Dr. Robertson went over the procedure and answered any questions she had. Before leaving to begin surgical preparations, he placed his signature on both knees. The signature ensures the operation will take place on the correct appendage.





Before being taken away by a fellow nurse, Carla met with a member of the anesthesia team. She walked slowly, carefully guided to the surgical room where she received her new artificial knees, specially crafted just for her. In the hours leading up to this moment, she reminded herself and those around her how badly she wanted to return to life without pain, life with more bike rides and playtime with her grandkids.

Her knee pain began eight years ago. She wants everyone on the fence about this procedure to understand its benefits. “Do not wait to have surgery if it is recommended,” said Carla. Over time, she could not walk long distances and had to avoid stair use. Her family went as far as renovating their home to move the washer and dryer upstairs so she could do laundry without the painful slog up and down stairs.

Carla’s surgery was completed without complications. She stayed one day in the hospital. She was discharged the next after a short session with physical therapy.

This milestone set off several weeks of celebration within Tri-County Health Care, including gifts for Carla, a cash raffle, cake pops for all staff, and even new shirts emblazoned with the 500th joint replacement logo.

Take the first step!

If you or someone you know suffers from chronic joint pain, visit TCHC.org/ortho to complete an easy online joint assessment for personalized results to determine if an evaluation with our orthopedics team is recommended. There is no need to give up the things you love.

More comfortable mammograms

Tri-County Health Care is always looking for new ways to be innovative. Recently, technology upgrades in the radiology department have made mammograms more comfortable for patients. This past Fall, Tri-County Health Care invested in the Hologic SmartCurve Breast Stabilization System. The new system includes an assortment of conforming paddles that cradle breasts, allowing for better imaging, increased comfort and more even compression. Tri-County Health Care is one of the few organizations in Minnesota that provides this tool for patients.

Don’t delay this crucial screening. Women should start receiving routine mammograms at age 40.





Inside the ER

The hospital's emergency room might be one of the most intense places to find yourself, as a patient and provider. In many cases, it is the fine line between life and death, a place that demands the highest level of medical intervention at a pace that only a select few can provide. Pandemic conditions amplify this intensity. COVID-19 has changed virtually every aspect of our society, making emergency room operations all the more daunting. At Tri-County Health Care, Rachel Redig, M.D., serves as the Emergency Department Director and Trauma and Stroke Director. She and her ER team have been tasked with tending to the critically ill and injured during one of the worst medical disasters ever to take place.

Looking back

In the fall of 2020, a surge slammed the nation, and COVID-19 positive patients filed into emergency rooms across the country at a time when experts were still trying to figure out the virus. Dr. Redig and her staff managed the best they could and were eventually granted some reprieve when positivity trended downward. It appeared the community of Wadena and the rest of the country was on track to a new normal, fueled by a newly formulated vaccine. This newfound hope would be short-lived.

The surge

Once again, COVID-19 has picked up speed. The delta and omicron variants combined with an ever-growing fatigue of mitigation has led to a surge far worse than the Fall of 2020.

"Now it feels like we're in the never-ending free fall of a rollercoaster," remarked Dr. Redig during a recent interview. At 18 hours into a 24-hour shift, she discussed just some of the challenges faced regularly in the emergency room.

“I think 'helpless' has been a frequent feeling the last few months. Watching my patients worsen, knowing what they need, but not being able to get it for them is a regular occurrence right now. It is an awful feeling and goes against every reason I went into medicine.”

RACHEL REDIG, M.D.

"A year ago, during our prior surge, I remember thinking how frustrated I was with hospitals being full and having difficulty transferring patients. This surge has taken those challenges and multiplied them 100-fold. It has been over two months since we were able to provide a typical standard of care because there is no room," said Dr. Redig when asked about transferring struggles. The staff are locked in a never-ending battle to care for patients with COVID-19, but they can't forget about everyone else. Heart attacks, strokes and broken bones can't be ignored. Medical staff have even resorted to airlifting patients hundreds of miles away to different states to get them the care they need, sometimes for issues that are relatively easy to treat under normal conditions.

Waiting for a bed

Dr. Redig and her team hope they are approaching the end of the latest surge. They want patients visiting the ER to understand the state of healthcare in the United States. Under normal conditions, staff would be able to handle patients in a reasonable fashion, but that isn't possible at this time. The constant influx of sick patients prompts longer wait times, forcing staff to use triage methods to determine which patients to treat first. Due to the shortage of beds, some patients are being boarded in the ER while waiting for a bed to open in the hospital. Some patients are being intubated for extended periods, which is not typical at this level of care in a rural setting.

The COVID-19 vaccine is the best way to take the pressure off our strained healthcare systems. People receiving the vaccine are significantly less likely to contract COVID-19 or be hospitalized due to infection.

Construction Update



Have you seen the latest episode of Behind the Barricade? Foundation Executive Director Ryan Damlo explores the construction site to share updates and exciting milestones.

Visit TCHC.org/build2023 and follow us on social media for all future episodes.



Farewell...but not forgotten

This recurring feature will honor the commitment of recent retirees of Tri-County Health Care



MARLA HAAVIG Patient Access

Since retiring, Marla has been busy catching up with life at home. She has many plans in the works but for right now, she is getting ready for the holiday season. Marla is looking forward to living a healthier life as she looks for her next big adventure, which will most likely involve a little gardening and maybe a trip or two.



VONNIE PERIUS

Patient Access/Information Desk

After years of dedicated service, Vonnie has left the information desk to spend some quality time on the farm with her grandkids. She misses her Tri-County family but knew it was time to move on. She happily reflected on her time as a patient advocate; assisting people brought her true joy.

When asked what she misses most about Tri-County, she simply responded with, "I had the best coworkers you could ever ask for."



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