

Fall 2020

# heart *to* heart

Your local guide to good health  
from Samaritan Health Services

**Busy mom finds  
appreciation for  
the little things**





## From the president

Doug Boysen, JD, MHA  
President/Chief Executive Officer

# Riding the waves of COVID-19

“You can’t stop the waves, but you can learn to surf.”

That thoughtful perspective comes from John Kabat-Zinn, a retired medical school professor who founded the Center for Mindfulness, Health Care and Society at the University of Massachusetts Medical School. His words seem particularly relevant as we continue to “ride the waves” of COVID-19 and work together with our communities to reduce its transmission.

Although we’ve learned a great deal through our planning and experience in recent months, ultimately there is no playbook or protocol for what we are living through right now — locally and globally. We are facing a unique virus that will continue to dramatically impact our social and economic lives until a vaccine and effective treatment can be developed.

But there is good news. Our clinicians and staff are providing exemplary care for those we are seeing in our clinics,

hospitals and via telehealth. Our team is also giving compassionate support to one another. Many community members have given generously toward our collective efforts by sewing and donating cloth masks and other personal protective equipment. The generosity also included providing food for our hospital workers and donations to our COVID-19 relief fund for employees whose work schedules were reduced or who volunteered for a two-month furlough when their programs were curtailed or suspended due to the pandemic. This support has meant a great deal to all of us, and we are truly grateful.

As we look toward what is next, I wanted to share portions of a message I sent recently to our 6,000 employees concerning how we can best “ride the waves” during this turbulent time. Here is what I told them:

“I often speak about our mission. I don’t know if ‘Building Healthier Communities Together’ has ever

been more critical than right now. Although we are facing a very unique situation, since I assumed the CEO role more than two years ago, we have been striving together to increase employee engagement, develop aligned teams to address specific initiatives, foster strong community collaborations, and apply operational rigor to sustain our organization financially during challenging times. These are the same fundamental tools we need to effectively address the impact of COVID-19.

“To use a theater metaphor, it is like we have been practicing for two years and now it is opening night. We’ve got this.”

All of us at Samaritan will continue to be here — with you and for you — to build healthier communities together.

Sincerely,



Read about Anthony Pollard and how he has persevered in good times and bad. Story on page 13.



Read about Audrey DeKam and how a shoulder injury instilled a newfound appreciation for the little things. Story on page 23.

**Editor’s note:** Physical distancing measures were followed when shooting photos for this publication. Many photos were taken very early in the pandemic before face covering recommendations were in place.

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### Letters to the editor

Please send your questions and comments to feedback@samhealth.org or to: Julie Jones Manning, 2300 NW Walnut Blvd., Corvallis, OR 97330

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# How the pandemic is reshaping health care

Even before the coronavirus prompted widespread stay-at-home orders, leaders at Samaritan Health Services reacted quickly to the pandemic by temporarily closing many clinics and offering alternative ways of accessing care. Expanding already-existing telehealth options was one alternative that remains popular today.

“While telehealth was already in use at Samaritan for some specialty care, it wasn’t used as widely as it is now,” said Kristy Jessop, MD, senior medical director for Samaritan’s primary care clinics in Corvallis. “We have discovered that telehealth is not an inferior substitute for face-to-face care, but another means of patient care that makes sense in many situations, especially for those who are highly susceptible to infection or who are homebound. But it’s also a good option for someone who is strapped for time.”

Using a computer or smartphone and video technology, patients and health care providers can see each other and converse as they would during a typical in-person appointment. However, patients don’t need to leave their home for an appointment. In some cases, opting for a telehealth appointment will allow patients quicker access to a provider than a traditional clinic visit.

“Telehealth is not appropriate for every situation, certainly, but I do think it gives us another very useful tool in caring for our patients,” said Dr. Jessop.

In this new COVID-19 climate, Samaritan support groups have been meeting virtually as well.

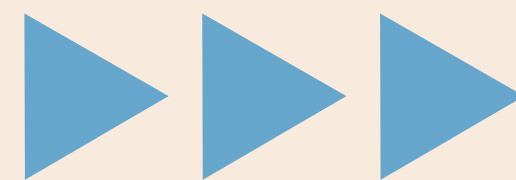
Patty Kinion, a social worker with Samaritan Evergreen Hospice, now leads online grief groups for people whose loved ones have died. She shared that while the format was an adjustment at first, the groups are working well now.

“Group members were so glad to connect in the group, to see and hear each other, and offer support and resources again. It was really a special thing,” Kinion said. “For those who are physically vulnerable plus completely isolated from others, this connection is priceless to them.”

She noted another benefit of this new way of connecting.

“Meeting virtually allows us to support people wherever they are — even if they live in another state, as can be the case with some loved ones of patients who’ve died,” said Kinion. “Previously, we didn’t offer grief support to family and friends who don’t live nearby, but now, anyone who has lost a loved one can participate. It’s been well-received.”

Time will tell, though many health care industry experts predict that virtual options will continue to become a mainstay of patient care well after the pandemic subsides.



To find out more about telehealth, MyChart E-Visits and clinic visits during the COVID-19 pandemic, visit [samhealth.org/Telehealth](https://samhealth.org/Telehealth).



## Tips for a successful telehealth visit

The COVID-19 pandemic brought with it many changes. One opportunity that has been embraced and appreciated by patients across the region is Samaritan’s expanded telehealth programs. Most health insurances cover telehealth, which can be conducted conveniently from the comfort of a patient’s home or office.

The next time you call your primary care provider for an appointment, you may be offered a telehealth visit, depending on your health concerns.

Robert Fallows, PsyD, of Samaritan Neuropsychology – Albany offers the following tips to help prepare for a telehealth visit:

- Prepare for your telehealth visit much as you would for a visit to your health care provider’s office by making a list of your questions and concerns, and your current medications.
- Get your technology ready to go by testing your webcam and microphone, making sure the volume is on, and plugging in your device to make sure your battery does not run out during your telehealth visit.
- Consider the lighting. Set up lighting in front of where you are with your device and minimize the lighting behind you.
- Ensure you have a private space where you will feel comfortable sharing personal information and try to find a quiet place where you won’t be interrupted.
- Have your health care provider’s office phone number handy and share information when setting up your appointment so the provider can reach you in the event you are disconnected or experience a serious health event. Examples of what your provider may need in case of emergency are:
  - The physical address of where you are participating in the virtual visit.
  - Your phone number.
  - Contact information of someone who can physically reach you at your present location.
- Remember that the provider may have a more difficult time reading your body language or non-verbal cues compared to a face-to-face visit.
- Indicate who is in the room with you and ensure the provider can see that person on the camera.
- Have a parent or legal guardian present for visits with minors to provide consent, and who will stay nearby, or possibly in the room, during the visit.

MyChart E-Visits, in which patient can answer questions about their health concerns and receive a call back from a health care provider, are also available through Samaritan Health Services.

# Projects transform health care delivery in region

Creating new and innovative systems and approaches to delivering health care services is a top priority of the region's InterCommunity Health Network Coordinated Care Organization (IHN-CCO), which serves Benton, Lincoln and Linn County.

Coordinated care organizations, or CCOs, provide health coverage for Oregon's Medicaid population. As Oregon begins its second five-year contract with the state's 15 CCOs, IHN-CCO has emerged as a recognized leader for impacting and influencing health care transformation. A key reason is its Delivery System Transformation Committee (DST), which was created "from the ground up" and funds innovative pilot projects designed to reimagine how health care is delivered.

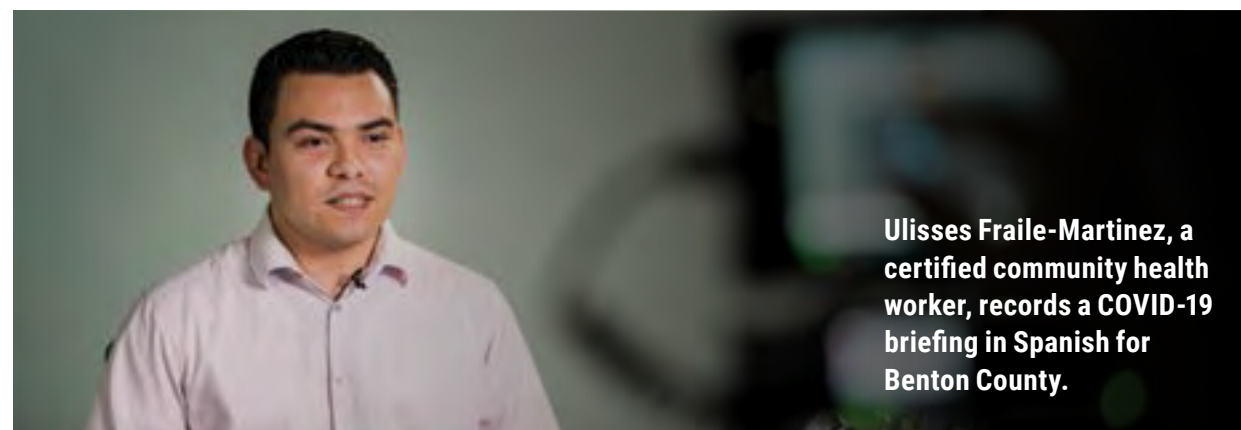
"Nobody else is doing this," said Sherlyn Dahl, former executive director of the

Community Health Centers of Benton and Linn Counties and the founding co-chair of the IHN-CCO's Delivery System Transformation Committee (DST). "It's not about funding something good. It's about finding something new."

The DST's formula for success is to target where funds are spent, focusing on spreading and sustaining successful projects and deepening the impact of the work through community partnerships. By working with community partners, IHN-CCO is improving health outcomes, while increasing access and lowering the cost of health care.

"The landscape is changing, and with that change we have an opportunity to make real change in our communities," said Beck Johnson, the new community cochairperson of DST and director of the Bravery Center at the Olalla Center.

Since 2013, more than \$20 million has



Ulisses Fraile-Martinez, a certified community health worker, records a COVID-19 briefing in Spanish for Benton County.

been invested in 65 pilot projects that have been completed in collaboration with more than 50 community partners. Pilot projects funded through IHN-CCO's Transformation Plan represent some of the most innovative work.

"We are at a critical juncture," said Johnson. "The projects we choose to support now must reflect our commitment to health equity, increasing access and improving care

for the most marginalized populations in our region."

This includes the Tri-County Traditional Health Worker Training Hub, which prepares people to fill critical roles in health care and social services, including the frontlines of the COVID-19 response. The training hub, the first of its kind in the Willamette Valley, began as a pilot project. During the six-week program, participants who share ethnicity,

language, socioeconomic status or life experiences with people needing services learn to navigate the health care and social services systems.

"Traditional health workers are good at breaking barriers because they've already had to break barriers for themselves or their family members," said Kelly Volkmann, health navigation program manager for Benton County Health Services.

Those who complete the course are eligible to obtain state certification to work in the health care or social services industries. Certified workers fill positions, such as doulas, addiction and recovery peer support specialists and health navigators providing culturally and linguistically appropriate assistance. This local

network of skilled traditional health workers stands ready to bridge the gap. When Benton County issued an emergency declaration because of COVID-19, Ulisses Fraile-Martinez was chosen as the spokesperson to deliver video briefings tailored to the Spanish-speaking community. Fraile-Martinez was in the first class to complete health worker training in 2018. Since then, more than 80 people have received training to work in this emerging and important role in health care, and courses are regularly offered in all three counties.

"The Traditional Worker Training Hub is a collaboration of community partners that care, want to be successful and maximize our resources together," said Volkmann. "I couldn't imagine doing this on our own."

**To learn more about IHN-CCO's transformative work, visit [ihntogether.org/Transforming-health-care](http://ihntogether.org/Transforming-health-care).**

## Reluctant at first, former health navigator now leads training program

When a friend first told Analuz Torres about a health navigator job at Benton County Health Services, she didn't think she was qualified.

Despite a wealth of experience advocating, interpreting, translating and breaking down communication and cultural barriers for her family and friends in the California farming community where she grew up, she couldn't imagine doing it as a career.

"Do I really think I can do this?" she questioned herself.

At that time, Torres was working on her bachelor's degree and didn't think she had enough education to be a health care team member. But despite her reservations, Torres applied and got the job.

When she started working for Benton County, she did outreach and enrollment for the Oregon Health Plan. She picked up the terminology and moved to working in care teams. Fast-forward three years, Torres is now a training coordinator for the Tri-County Traditional Health Worker Training Hub where she teaches others to use their lived experience to become community health workers.

A 2018 Delivery System Transformation pilot project from InterCommunity Health Network Coordinated Care Organization serving Benton, Lincoln and Linn counties, helped to establish the Training Hub where Torres is now a leader.

*continued on page 14 ...*



## Peer support specialist uses experience, connections to help others

Many people who work in the addiction and recovery field have what's called "lived experience."

Chelsey Allen of Newport is one of them. The certified recovery mentor manages the Newport and Lincoln City offices of C.H.A.N.C.E. (Communities Helping Addicts Negotiate Change Effectively). C.H.A.N.C.E. provides addiction and recovery centers that help people at all levels of recovery with mental health and substance abuse disorders.

"My past is colorful," Allen said. "It's what brought me to this job."

It's also what helps her to connect with people who are working toward and staying in recovery.

"A good day is helping someone to meet their goals; giving back and helping people, walking with them and guiding them through barriers I faced," Allen said.

Sometimes, that means getting someone into treatment. Other days it is finding stable housing. She also facilitates a support group, Dual Voices, for people who are struggling with mental health and addiction.

These are among the goals that were outlined in C.H.A.N.C.E.'s 2018 pilot project proposal for funds from InterCommunity Health Network's Delivery System Transformation Committee.

*continued on page 21 ...*

# Breast cancer survivor looking, feeling her best after reconstructive surgery

There comes a point in extreme distance running where the only thing you think about is putting one foot in front of the other and finishing the next mile.

That's how Shannon Van Deusen, from Albany, completed a 50-mile race in October 2018, the longest race of her life. She had been training hard and was in peak physical condition when she discovered a lump in her left breast.

Then 42 years old, and with no direct family history of breast cancer, Van Deusen didn't automatically assume the worst. But when the lump didn't go away, she called her doctor's office for an appointment. A mammogram was scheduled, and the results were suspicious. A follow-up ultrasound and biopsy were ordered, but these tests would be done after her race.

As Van Deusen ran, she thought about the possibility of cancer, but she didn't dwell on it. Even with the growing concern, doubt did not overshadow her accomplishment as she crossed the finish line beating her previous time by almost 45 minutes.

"It was a great day," Van Deusen recalled.

But she couldn't outrun cancer.

Van Deusen soon learned that she had triple-negative breast cancer, an aggressive but treatable form of breast cancer, bringing uncertainty, fear and pain. Not only was she facing a life-threatening diagnosis, but the treatment is also a disfiguring operation.

## Deciding on restorative surgery

As a local hairdresser for 20 years, many of Van Deusen's clients have had breast cancer and reconstructive surgery. It was based on the positive experiences of others that she chose to receive all of her treatment in her hometown of Albany.

"I have had no regrets whatsoever," Van Deusen said.

Early on, Van Deusen decided that she wanted to have reconstructive surgery after chemotherapy and a double mastectomy.

"I wanted my clothes to fit and feel normal," she said.

Based on the recommendations of her clients and friends, Van Deusen met with reconstructive surgeon Kevin Day, MD, of Samaritan Plastic, Reconstructive & Hand Surgery. Dr. Day reviewed before and after photos of the options available with Van Deusen and explained the different procedures.

Based on the location of Van Deusen's tumor near her armpit, she was able to have a nipple-sparing mastectomy, a procedure where a woman's nipple is retained and the incisions are made on the underside to hide the scars for a more natural look.

In the same surgery as Van Deusen's mastectomy, Dr. Day placed temporary tissue expanders. After a few weeks, fluid is added to increase the volume and stretch the skin to the correct size. This also allows time for healing and to create an internal pocket of scar tissue that will support the implant.

During her recovery, Van Deusen and her family vacationed at Disneyland to celebrate that the worst part was over. Then when summer ended and her daughters were back in school, Van Deusen had the second surgery with Dr. Day to put the implants in place. There are many individual factors to consider in deciding on breast reconstruction, but Van Deusen and her surgeon agreed this was the best option for her active lifestyle. Shannon's reconstruction was performed above her pectoralis major muscle, rather than below it, a new approach that carries a higher patient satisfaction rate than the traditional approach of placing the implant under the muscle.

Van Deusen recalled Dr. Day's kindness during a post-operative appointment last fall when he noticed the side effects of an oral chemotherapy drug she was taking to reduce the chances of cancer recurring. Her hands and feet were blistering, cracking and peeling.

Dr. Day was concerned, and after checking with the oncology team, he gave Van Deusen lotions to help with the symptoms.

"He didn't have to do that," she said. "He wants you to feel your best and look your best."

## One foot in front of the other

The goal of surviving and returning to an active lifestyle was a motivating factor in Van Deusen's recovery. Now when she heads out the door, it's with a sense of gratitude and purpose.

It's been just over a year since she completed breast reconstruction surgery. Van Deusen, now 44, is almost back to the running form she was in before the devastating diagnosis. She's training for her next 50-mile race, running with her sister Dawn Knoll, and she's resumed an elite fitness routine. She's back to work and coaching her daughters in volleyball and softball.

No matter how far or how fast she runs, Van Deusen is thankful for every step, for being here to see all the people who supported her on her journey.

Van Deusen is open to talking about her decision to have breast reconstruction surgery.

"I feel like knowledge is power," she said. "Don't be afraid to ask questions."

Van Deusen also doesn't take things for granted, especially her health.

"I am thankful for every single day I wake up and feel well," she said.

**Learn more about services available at Samaritan Plastic, Reconstructive & Hand Surgery at [samhealth.org/Beauty](https://www.samhealth.org/Beauty).**



## Consider reconstruction options in advance of mastectomy

The same breast reconstruction techniques used by surgeons at the most renowned centers in the world are available to women in Benton, Lincoln and Linn counties. Samaritan's board-certified plastic surgeons are experienced in multiple techniques and work closely with surgical, medical and radiation oncology teams to offer optimal care and help women return to feeling whole again.

"We can do most types of breast reconstruction," said Kevin Day, MD, plastic and reconstructive surgeon with Samaritan.

Recent advances in surgical techniques have improved patient outcomes, allowing women to achieve a normal appearance in clothing and swimwear.

After a breast cancer diagnosis, women

can learn about reconstruction options at a preoperative appointment.

"We go over all the options available," Dr. Day said.

Breast reconstruction can be achieved through implants or the use of a person's own tissues. Not every technique is suitable to everyone, and Samaritan's reconstructive surgeons help each patient discover which technique(s) best meets her individual goals.

The initial reconstruction surgery is often performed at the same time as breast cancer surgery. The best results with implant-based reconstruction are often achieved in two-stages, beginning with a tissue expander and implant placement, revisions and finishing procedures done after

recovery from the initial breast surgery.

Many patients are able to resume activities after about six weeks. Routine checkups are encouraged to address any concerns that may arise. The goal is for women to return to a normal lifestyle with no visible evidence of reconstruction while wearing clothing and minimal scarring.

Dr. Day said safety and patient satisfaction guide his practice.

"I am always in awe of my patients and how they approach this procedure with so much strength," he said.

**Kevin Day, MD, practices at Samaritan Plastic, Reconstructive & Hand Surgery along with his colleague Richard Havard, MD, FACS, and can be reached at 541-768-4370.**

The breast center on Samaritan Health Services' Corvallis medical campus has relocated to the cancer center. The new location provides patients easier access to Samaritan's cancer services and collaboration with the oncology care team.

"While not all breast health concerns are cancer-related, this does account for a large portion of our patient's needs and health care concerns," said David Faddis, MD, FACS, a surgeon who specializes in surgical oncology and breast surgery.

The breast center offers comprehensive breast health services to meet the individual needs of patients. The care options at the breast center range from prevention, to diagnosis and treatment of more severe conditions like cancer or management of benign lesions, or referrals to other specialty services within the Samaritan network.

The compassionate care team includes fellowship-trained breast surgeons, radiologists, medical oncologists, genetic

counselors, radiation oncologists, plastic surgeons, rehabilitation services and much more.

"Our goal is to help our patients maintain good breast health and provide the support and education needed to take an active role in their breast care needs," Dr. Faddis said.

The breast center is accredited by the National Accreditation Program of Breast Centers, which is administered by the American College of Surgeons. The accreditation examines all aspects of breast cancer care and the patient experience.

Take an active role in your breast health — learn more about breast care services, visit [samhealth.org/BreastCenter](http://samhealth.org/BreastCenter).

**Samaritan Medical Group Breast Center – Corvallis is located within the Samaritan Pastega Regional Cancer Center at 501 Elks Drive, Suite 101.**

## Radiation therapy: A powerful option for treating cancer

If you have been diagnosed with cancer, your treatment plan may call for a combination of surgery, chemotherapy, hormonal therapy, immunotherapy and radiation therapy for treatment. However, not everyone receives all those treatments.

"Radiation therapy is used in more than half of patients who have cancer," said Patrice McGowan, MD, a radiation oncologist with the Samaritan Cancer Program. "Like each patient, treatment is different for everyone."

### What is radiation therapy?

Radiation therapy uses a precise dose of high-energy particles, which is delivered to the cancer tumor to damage and kill the cells, while limiting damage to healthy tissue.

"Cancer cells don't recover from damage as quickly as healthy cells," said Dr. McGowan, "That is why several treatments over time are given to allow healthy tissue a chance to heal, which limits the side effects experienced."

### Types of radiation therapy:

- External beam radiation, the most common type, can be used for many types of cancer. During treatment, a machine called a linear accelerator delivers radiation to the tumor. The machine does not touch the patient or tumor and is painless.
  - Conventional radiation therapy using this technique is given five days a week for up to eight weeks.

- Stereotactic body radiation therapy (SBRT) is a high dose of targeted radiation therapy and may be an option for some patients. It is typically delivered in five sessions over two weeks.
- Systemic radiation therapy uses radioactive isotopes, which may be given as a pill, through an IV or injected into the body. This therapy is common for thyroid cancer or to treat pain due to cancer that has spread to the bone.

While there are many ways to deliver radiation, Dr. McGowan noted that no one method is "better" than another — treatment is customized based on the patient's type and stage of cancer.

### When is it used?

Radiation therapy can be used at many different stages in the cancer treatment processes:

- Before surgery to shrink a tumor.
- After surgery to destroy any remaining cancer cells.
- To ease cancer symptoms or pain but without curing the cancer (palliative care).

"Radiation therapy isn't without risks, but it is one of the most powerful tools we have to treat cancer," said Dr. McGowan.

**For more about cancer services, visit [samhealth.org/Cancer](http://samhealth.org/Cancer).**

**Breast center now co-located with Samaritan cancer center**

# Mentorship program offers individualized prostate cancer support

Receiving a cancer diagnosis is a life-altering event filled with uncertainty and challenges. To help provide support and guidance, the Prostate Cancer Mentorship Program pairs newly-diagnosed patients with mentors who have a similar diagnosis, treatment and recovery. Peer support partners mentor and provide encouragement by sharing their personal thoughts and treatment experiences. Mentors are prostate cancer survivors. They share information about their own cancer journey regarding side effects, coping strategies and recovery obstacles.



mentor support for more cancer types and eventually having some form of mentorship available to all cancer patients.”

**For more information on these support programs and others, contact the Samaritan Cancer Resource Center, which has locations in Albany and Corvallis, at 877-311-4686 (toll free), online at [samhealth.org/Cancer](https://samhealth.org/Cancer) or by email at [CancerResourceCenter@samhealth.org](mailto:CancerResourceCenter@samhealth.org).**

## September is National Prostate Cancer Awareness Month

According to the American Cancer Society, staying current with your annual physicals helps promote early detection. Prostate cancer in early stages usually has no symptoms. More advanced prostate cancers can sometimes cause symptoms, such as:

- Problems urinating, including a slow or weak urinary stream or the need to urinate more often, especially at night.
- Blood in the urine or semen.
- Erectile dysfunction.
- Pain in the hips, spine, ribs or other areas.
- Weakness or numbness in the legs or feet.
- Loss of bladder or bowel control.

Learn more about prostate cancer and Samaritan Urology services at [samhealth.org/Urology](https://samhealth.org/Urology).

“Upon hearing of this program, I felt this was a perfect opportunity to help others better understand what to expect,” said Ed Lupkin, a volunteer mentor. “When I was told I had prostate cancer, it was like a punch in the gut. I had the wind knocked out of me. My first reason for being excited about the mentor program was to help others weed through all this (prostate cancer) information. Secondly, to show that the information most important is what your doctor is explaining to you. Third, patients need an advocate to help guide them. Someone who has gone through this and can certainly show empathy.”

Even before COVID-19, this program was designed for individualized mentor and mentee meetings: through emails, phone conversations, video conferences or in person. The mentor and mentee work together to determine the best format.

This new prostate cancer support program grew from the success of the Man to Man cancer support group, which provides a space for men to discuss the physical and emotional aspects of this disease in a group setting.

“We have support groups set up but not everyone is comfortable going into a group setting. The mentorship program allows us to meet the needs of individuals looking for peer support in a one-on-one setting,” said Erin Dunn, community outreach coordinator for the Samaritan Cancer Program. “I am also excited to use this format to open



Presented by Samaritan Foundations in partnership with SamFit, the Samaritan Walk Run Roll is a virtual 5K, 10K and half marathon. The event, sponsored by HUB International/Barker-Uerlings Insurance, allows participants to walk, run or roll at their leisure between Sept. 10 to 20.

Proceeds will benefit Samaritan’s Patient Support Program, which provides aid to patients, with demonstrated financial

need, to cover expenses such as medical bills, transportation, prescriptions, nutritional supplements and groceries.

**Support the health and well-being of your community by registering today at [samhealth.org/WalkRunRoll](https://samhealth.org/WalkRunRoll).**

## Orthopedic oncology: Keeping cancer care close to home

Cancer care is constantly evolving, and this is certainly the case for the treatment and accessibility of services for patients with a bone or soft tissue cancer diagnosis (also known as sarcomas).

“There are more than 60 different kinds of sarcoma cancers, yet a diagnosis of this type is still incredibly rare,” said Nicholas Tedesco, DO, an orthopedic oncology and adult reconstruction surgeon at Samaritan Health Services. “A rare diagnosis often spurs questions or concerns in patients: ‘Where can I get treatment? Will I have to travel? What does my prognosis look like?’”

This unique combination of expertise in orthopedic oncology and reconstruction surgery, coupled with the wide range of cancer care services available at Samaritan Health Services, means patients with this rare diagnosis and other cancers that may have spread to the bone can receive the care needed without travel to a bigger city.

Medical advancements in the field of bone cancer have also played a major role in patient outcomes. In upwards of 90% of cases, the tumor can safely be removed, and the

limb salvaged. This is due in part to technology and the development of off-the-shelf bone implants, and the ability to replace the diseased area more rapidly than when a custom bone implant was required.

“I am but one part of the algorithm of care for patients with this type of cancer diagnosis, and for some, surgery may be all that’s needed,” said Dr. Tedesco. “For others though, additional treatment such as chemotherapy, radiation or other care may be required and it’s a benefit to be able to tell a patient that Samaritan offers these services, so they can stay close to home for their continued cancer care needs.”



*Nicholas Tedesco, DO, is one of only 130 medical professionals in the United States to specialize in orthopedic oncology. For more information on bone or soft tissue cancers, visit the American Cancer Society’s website at [cancer.org](https://cancer.org). Learn more about Samaritan’s comprehensive cancer services at [samhealth.org/Cancer](https://samhealth.org/Cancer).*

# Building resilience together

Learn more and watch a video about Anthony Pollard at [samhealth.org/AnthonyP](https://samhealth.org/AnthonyP).

## Lebanon resident sets life goal, perseveres

Anthony Pollard, of Lebanon, has been through a lot in his 35 years, and he enjoys where he is now.

He has several pet chickens, all with their own names, and he loves growing their food in his garden. He also enjoys making pickles out of the cucumbers he grows as well as doing yard work for people in Lebanon.

“Chickens are really smart,” Pollard said. “People don’t think they are, but they have good memories. They remember sounds and they know their names. And they’re the only pet that can give you breakfast.”

He also loves weightlifting at SamFit. Before COVID-19 forced the gym to close temporarily last spring, Pollard was making great strides in his deadlifting and squatting.

A Special Olympics competitor in golf and bowling, he was planning on competing in powerlifting as well.

“Weightlifting is a team sport in some ways, and in other ways it’s not,” he said. “I can listen to my coaches and do everything they say, but I can’t pass the weight off to a teammate. It’s all about what you put into it, but you get to see the progress you make.”

Pollard has put in a lot of hard work to get to this point, due to a neurological condition he has had throughout his life. As a child, he had a large head and battled a lot of headaches.

“I also had problems with my gait, but that happened after I had a knee injury, so they chalked my gait problems up to that injury,” he said.

When Pollard was 13, his doctor misdiagnosed him with essential tremors. That sent Pollard into a downward spiral.

“My doctor told me that most people don’t get diagnosed with essential tremors until their 80s, and they don’t usually live long after that,” Pollard said. “They said I probably only had until I was 18. I decided that if I only had five years to live, why not do everything I’m not supposed to do?”

So Pollard got into drugs and other unhealthy behaviors. That continued into his 20s, even after he was correctly diagnosed with hydrocephalus, which is a fluid buildup in the cavities of the brain.

“I finally got my diagnosis because I had lost the ability to walk, and I had terrible shakes in all my extremities,” he remembered.

Since that diagnosis, Pollard has undergone multiple procedures to drain the fluid from his brain.

“After my third surgery, I was still addicted to drugs, and I skipped my six-month follow-up,” he said. “About a year later, I kept collapsing, so they put a shunt (drain tube) in my brain.”

These surgeries took place at Oregon Health & Science University. Following the shunt insertion, Pollard said his doctors had a frank conversation about his choices.

“They told me that I’d escaped death twice at that point, and did I really want to live?” Pollard remembered. “So I made changes at that point. I started treatment at Community Outreach (in Corvallis) and I’ve been clean and sober since May 3, 2011.”

Pollard credits his faith, caretaker Lance Kropf and Pastor Ted Boatsman for helping him get clean. However, his health journey has continued, with seven more procedures to adjust the shunt in his brain.

“Every adjustment basically resets my brain,” he said. “I had a bad reset after my last surgery in 2019, and I still wasn’t able to walk six months after the surgery.”

It was at that point that Pollard started working with several trainers at SamFit in Lebanon and Samaritan Athletic Medicine in Corvallis. He has also received care from Samaritan physicians Rick Wopat, MD and David Simmons, DO; as well as physical, occupational and speech therapy services from Samaritan’s therapists in Lebanon.

Pollard has loved working out at SamFit so much that the 15-minute walk to and from the gym doesn’t bother him.

“Through all of their work with me, I’m walking again,” he said. “I was doing great with my weightlifting before everything shut down.”

His plans and progress were set back when SamFit was forced to close for a few months last spring due to the COVID-19 pandemic, but it hasn’t dampened his spirit.

Pollard figures his deadweight max has dropped, but he kept up with a lot of his treatment virtually. He also continued to do gardening work.

What’s next for Pollard? He returned to SamFit in May when the facilities reopened, and he’s excited to pick up where he had to leave off with his weight training. Special Olympics has not been rescheduled yet, but he wants to continue training to compete in future weightlifting competitions.



## Use technology to socialize, decrease effects of isolation

Humans are inherently social creatures. The COVID-19 pandemic has reduced in-person socialization, which for some has negatively impacted their physical and mental well-being. Many are developing new, innovative ways of staying connected through the duration of extended stays at home.

“Positive social interaction may stimulate the release of stress-reducing hormones and decreases the feelings of depression,” said Petra Zdenkova, PsyD, a primary care psychologist at Samaritan Family Medicine – Geary Street in Albany. “It also improves cognitive function and boosts the immune system to help you ward off illness and live longer. Also, isolating yourself can lead to bad

habits such as overeating, smoking or substance abuse, which can shorten your life expectancy.”

The following can be helpful ways to engage with others using modern technology:

- Use an online video chat platform to connect with friends and family. Host a virtual party or holiday celebration. Play a game, cook or do an art project together through the computer.
- Join an online club such as a book, running, music, knitting, writing or spiritual club. There are online groups for every interest and finding those with similar hobbies and skill sets can help you feel part of something.

- Take an online class. If you have been thinking about going back to school, getting a certificate or just learning something new, now is a good time to explore those ambitions.
- Join an online workout to keep those endorphins going. You can find several videos on the SamFit Facebook page to help keep you active at home.

While connecting virtually has its limits, seeing and interacting with others, even by computer screen, can make a positive difference.

**Looking for a mental or behavioral health specialist? Call Samaritan’s Find-a-Doctor Line for help finding a provider at 800-863-5241.**

As training coordinator, Torres interacts with community agencies to recruit trainees and facilitate new partnerships. Collaborators include agencies and organizations from education, addiction and recovery, housing and homelessness, as well as health and social services.

Torres recently completed her bachelor’s degree in public health, and is beginning a master’s in public policy program this fall. But she emphasizes there are no education requirements for the training program. And with training and experience, there are many possibilities for job opportunities and growth.

“The heart of a community health worker is to help out the community. That’s all you need,” she said. “Everything else will fall into place.”

... continued from page 4.

It supports many different types of health and community agency workers, including birth doulas, community health workers, health navigators, peer support specialists and peer wellness specialists.

“In the training, we focus on motivating individuals so they can make this change in their communities,” Torres said.

Because she overcame uncertainty, Torres can relate to many people in the training.

“A lot of them have been doing this all of their lives,” she said. “They’ve just been doing it without getting paid.”

## Is it a cold, flu or COVID-19?

Cold and flu season is here, and you’re sick. How can you tell what you’re sick with and if you need to see a doctor?

With the start of cold and flu season coinciding with the COVID-19 pandemic it can be confusing to determine what symptoms relate to which illness.

Colds, flu-like illnesses and COVID-19 share many symptoms. These include fever, which tends to relate more to the flu or COVID-19 and merits contacting your primary care provider.

“With any cold and flu-like illness, we continue to ask patients to call their health care providers first thing, so their symptoms can be assessed, and patients can be routed to appropriate treatment and testing,” said Adam Brady, MD, of Samaritan Infectious Disease.

Regardless of your symptoms, you should stay home and limit contact with other people to avoid spreading the illness. Make sure to disinfect high-touch areas – such as doorknobs and countertops – and wash your hands frequently.



To reduce your chances of catching the flu, be sure to get a flu shot. More information on where you can get a flu shot can be found at [samhealth.org/Flu](https://samhealth.org/Flu).

Below is a matrix to help you identify the signs of cold, flu-like illnesses and COVID-19. While this might serve to inform you about your symptoms, please remember to call your health care provider if you have any cold, flu or COVID-19 symptoms or complete a Coronavirus Concerns visit through [samhealth.org/MyChart](https://samhealth.org/MyChart).

Symptoms	Coronavirus* (COVID-19) Symptoms range from mild to severe	Cold Gradual onset of symptoms	Flu Abrupt onset of symptoms
Length of symptoms	7 to 25 days	Less than 14 days	7 to 14 days
Cough	Common (usually dry)	Common (mild)	Common (usually dry)
Shortness of breath	Sometimes	No**	No**
Sneezing	No	Common	No
Runny or stuffy nose	Rare	Common	Sometimes
Sore throat	Sometimes	Common	Sometimes
Fever	Sometimes	Short fever period	Common
Feeling tired and weak	Sometimes	Sometimes	Common
Headaches	Sometimes	Rare	Common
Body aches and pains	Sometimes	Common	Common
Diarrhea	Sometimes	No	Sometimes for children
Chills/repeated shaking	Sometimes	No	Sometimes
Loss of taste or smell	Sometimes	Rare	Rare

Your symptoms may vary. \*Information is still evolving. \*\*Allergies, colds and flu can all trigger asthma, which can lead to shortness of breath. COVID-19 is the only one associated with shortness of breath on its own.

Sources: Asthma and Allergy Foundation of America, World Health Organization, Centers for Disease Control and Prevention

# Navigating holidays during the pandemic

While holiday festivities may look different this year due to COVID-19, there are many ways to connect with and support loved ones this season.

“If we’ve learned anything these past months, isolation can take its toll on your emotional and mental health. So be sure to try and connect with those you love,” said Bella Vasoya, PsyD, a clinical psychologist with Samaritan Health Services. “You may need to get creative, whether meeting in-person wearing masks and keeping physical distance, or by phone or FaceTime. But try to make the time.”

Since COVID-19 is still active, continue to set boundaries that help you and others feel safe.

“There can be tremendous pressure in social situations, but we have choices in how we engage,” said Dr. Vasoya. “For example, it’s OK to say to the host, ‘I’m still feeling anxious about the virus. It would make me feel more comfortable if I know that everyone will be wearing a mask.’ If your host states they are not requiring all guests to wear a mask, you can then choose whether to attend in-person or virtually.”

If you attend a gathering where all precautions are being exercised and you still find yourself feeling anxious, try to stay in the present moment rather than worrying what may happen. Practicing relaxation can help modulate these emotions too, she said.

“A simple way to relax is to pause and take five deep belly breaths — this helps the body reset when a moment of peace is needed,” Dr. Vasoya said.

Still, because of physical distancing precautions, there will be loved ones we cannot be with over the holidays. Gathering virtually is better than nothing, but it’s not the same.

“Being together virtually doesn’t give us that tactile sense of things the way that sharing a hug or a touch does,” said Dr. Vasoya. “Try wrapping up in something the person used to wear or something that brings them to mind as a way of feeling that person’s presence around you — it may provide comfort.”

*Bella Vasoya, PsyD, is a clinical psychologist with the Samaritan Weight Management Institute.*



## Diabetes and heart disease go hand-in-hand

Most people don’t associate heart disease with diabetes, but they do have several ties.

“According to the American Heart Association, 68% of people with diabetes over 65 die from heart disease,” said Brooke Duncan, RDN, dietitian with Samaritan Albany General Hospital Diabetes Education. “A Harris Poll Survey in 2018 found half of all people with diabetes were unaware of this risk. The reasons for this increased risk are complex, but the patient doesn’t usually learn about it until after a heart event.”

The American Diabetes Association’s “Healthy ABCs” reminds people to monitor three primary measurements to lower their risk of cardiovascular disease in the future.

**A1C** — goal of less than 7%

**Blood pressure** — consistently less than 130/80 mm Hg

**Cholesterol** — LDL (bad) less than 100 mg/dl

Other risk factors include obesity and elevated blood lipids.

“Unfortunately, studies show that risk goes beyond metrics, and even cases of well-controlled diabetes remain at some risk,” Duncan said. “Research suggests that this is due to insulin resistance and continuous high blood sugar levels.”

Duncan recommends having a discussion with your health care provider if you have any risk factors or concerns about heart disease.

“The American Diabetes Association and American Heart Association have a campaign called ‘Know Diabetes by Heart,’” Duncan said. “It focuses on empowering individuals with diabetes to take control of their risk of heart disease. People with diabetes are at risk for heart disease, but healthy habits and continued monitoring can reduce those risks.”

**Visit [diabetes.org](https://diabetes.org) or [heart.org](https://heart.org) for more information about the campaign. To learn more about Samaritan’s heart and diabetes services, visit [samhealth.org/Heart](https://samhealth.org/Heart) or [samhealth.org/Diabetes](https://samhealth.org/Diabetes).**



## Heart-healthy recipe: Creamy smoked salmon dip

by Marian Smith, Warm Springs Indian Reservation, modified and analyzed by Sara Lee Thomas, RD

This heart healthy salmon dip delivers a smoked salmon taste without the smoked salmon price tag. It's fancy enough for a party but easy enough for a stay-at-home meal or snack.

A quarter-cup serving has 500 to 600 milligrams of heart-healthy omega-3 fats, which is the equivalent of two fish oil pills. Salmon also contains astaxanthin, a natural red pigment that makes krill red and salmon pink, which is an impressive antioxidant and has anti-inflammatory powers. A 3-ounce piece of salmon contains up to 3,000 micrograms of astaxanthin — 100 times more than krill oil, which has 25 micrograms per pill.

Dip into this treat with no guilt as it packs a healthy punch.

Prep time: 10 minutes. Servings: 12

### Ingredients:

- 1, 14-ounce can salmon, pink or red
- 1/2 bunch green onions
- 1/4 teaspoon liquid smoke
- 1 tablespoon lemon juice
- 1 tablespoon horseradish
- 8 ounces fat-free cream cheese
- Pinch of parsley flakes

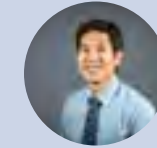
### Instructions:

1. Drain salmon and remove any visible bones or skin. Mix all ingredients in a small bowl. (Use scissors to quickly cut green onions).
2. Refrigerate until ready to eat. Serve with whole-grain crackers and baby carrots for a healthy, no-cook meal or snack.

Nutrition information per serving base on listed ingredients:  
 Serving size 1/4 cup; Calories 70; Carbohydrates 2 g;  
 Protein 9 g; Fiber 0 g; Sodium 250 mg; Total fat 3 g;  
 Saturated fat 0.5 g; Trans fat 0 g; Cholesterol 25 mg;  
 Total sugars 0 g; Added sugars 0 g

Visit [samhealth.org/RecipeMinute](https://samhealth.org/RecipeMinute) to watch a cooking demonstration of this recipe and many more.

## Samaritan welcomes new health care providers



**Timothy "Tim" Arakawa, MD, PhD**, has joined Samaritan Endocrinology. He earned a doctoral degree in physiology and a medical degree from Loma Linda University School of Medicine. He can be reached by calling 541-768-5218.



**Melissa deWolfe, DO, MPH**, has joined Samaritan Surgical Specialists – Newport. She earned a bachelor's degree from Haverford College, a medical degree from Philadelphia College of Osteopathic Medicine and a master's degree in public health at East Carolina University. She can be reached at 541-574-4795.



**Margaret Federoff, PA-C**, has joined Samaritan Weight Management Institute. She earned a bachelor's degree at University of Wisconsin-Whitewater, and a master's in physician assistant studies at Loma Linda University School of Allied Health Professionals. She can be reached at 541-768-4280.



**Rabin Gerrah, MD**, has joined Samaritan Heart Center Cardiac Surgery. He earned a medical degree at Hadassah Medical School. Dr. Gerrah completed fellowships through Harvard University Hospitals at Beth Israel Deaconess Medical Center, Massachusetts General Hospital and Columbia University College of Physicians and Surgeons. He can be reached by calling 541-768-5223.



**Maria Gornostaeva, LCSW**, has joined Samaritan Mental Health – Corvallis. She earned a master's in social work at University of Illinois at Chicago. She can be reached at 541-768-5235.



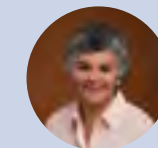
**April Jensen, DO**, has joined Samaritan Albany Surgical Associates. She earned a bachelor's degree at Union College and a medical degree at College of Osteopathic Medicine of the Pacific-Northwest, and a master's in public health at Nova Southeastern University. She can be reached at 541-812-4580.



**Gwyn Mahony, DO**, has joined Samaritan Internal Medicine and Samaritan Pediatrics. She earned a bachelor's degree at Touro University California, and a medical degree at College of Osteopathic Medicine of the Pacific-Northwest. She can be reached at 541-768-5140.



**Alana Rushton, PA-C**, has joined Samaritan Coastal Clinic. She earned a master's in physician assistant studies at A.T. Still University of Arizona School of Health Sciences. She can be reached at 541-996-7580.



**Jacquelyn Sinclair, FNP, MSN**, has joined Samaritan Heart Center Cardiology. She earned a bachelor's degree from Oregon Health & Science University School of Nursing and a master's in nursing from Gonzaga University. She can be reached at 541-768-5205.



**Joshua Schirripa, PA-C**, has joined Samaritan Lebanon Health Center. He earned a bachelor's degree from University of California Santa Cruz and a master's in physician assistant studies from Pacific University. He can be reached at 541-451-6282.



**Monica Thukral, ANP**, has joined Samaritan Heart Center Cardiology. She earned a bachelor's degree at Johns Hopkins University School of Nursing, and a master's in nursing at Stony Brook University, a master's in public health from University of California, Los Angeles. She can be reached by calling 541-768-5205.



**Michael "Derek" Williams, DO, FACS**, has joined Samaritan Surgical Associates – Lincoln City. He earned a bachelor's degree at University of Colorado, Boulder and a medical degree at Nova Southeastern University College of Osteopathic Medicine. He can be reached by calling 541-994-8114.

### Need help finding a doctor?

Visit us online at [samhealth.org/FindADoc](https://samhealth.org/FindADoc) or call 800-863-5241.

# Your options for safe, secure care

Whether you need to be seen for a routine screening or have a more pressing health care concern, Samaritan Health Services offers a full spectrum of care options to fit your needs. Patients can be assured care from a Samaritan provider or facility is safe and secure, no matter which option you choose.

## Telehealth

Patients across our region have embraced telehealth as a convenient option for many kinds of primary and specialty care appointments that do not require an in-person visit. Telehealth is safe and secure, featuring two-way encryption and other security measures, and most insurance plans cover this option. For more information, visit [samhealth.org/Telehealth](https://samhealth.org/Telehealth).

## Primary and specialty care

Safety and cleanliness have always been priorities at all Samaritan facilities. While it's uncertain what the COVID-19 pandemic might bring this fall and winter, our health care system is prepared. We have many enhanced measures in place, including the use of face coverings per state and federal health authority guidelines, more frequent cleaning of surfaces and more.

## SamCare Express

With locations in Albany and Corvallis, SamCare Express offers same-day treatment with easy online scheduling for a variety of minor illnesses and injuries. Book your appointment at [samhealth.org/SameDay](https://samhealth.org/SameDay) for a time that's convenient for you. Walk-ins will be scheduled for the next available appointment.

## Samaritan urgent care/walk-in clinics

With several locations in Benton, Lincoln and Linn counties, our urgent care/walk-in clinics are for acute medical conditions that require immediate attention but are not considered to be life threatening or severe enough for the hospital emergency department. These clinics have X-ray and lab services for broken bones, blood draws and other pressing health concerns. Visit [samhealth.org/CareNow](https://samhealth.org/CareNow) to find a location near you.

## Emergency departments

Emergency services are located at each of Samaritan's five hospitals in Albany, Corvallis, Lebanon, Lincoln City and Newport. When you have a serious illness or injury that may be life threatening, you need to go to the emergency

department, and in many cases, you should call 911 rather than drive yourself or your loved one. If you are experiencing a medical emergency, call 911.

Each situation is unique, and the best way to find out which option is best for you is to call your primary care provider or send them a message through the MyChart patient portal at [samhealth.org/MyChart](https://samhealth.org/MyChart).

**Patients who have any cold or flu-like symptoms are asked to call their primary care provider or do a MyChart "Coronavirus Concerns" E-Visit at [samhealth.org/MyChart](https://samhealth.org/MyChart) to be assessed and routed to appropriate testing and care.**

## Finding the right provider doesn't have to be difficult

If you need to find a health care provider, or just learned that you're expecting, don't worry. Samaritan Health Services offers a free Find-a-Doctor line that makes it easy.

When you call, you'll be asked where you live and work or go to school, and also whether you have any special needs, such as language preferences or specialty care.

"We can help patients with any requests they have," said Whitney Johnson, manager of Samaritan's Find-a-Doctor service.

Some of Samaritan's clinics offer extended hours and additional services. And all clinics and locations provide convenient services, such as prescription refills and test results. So you'll be in good hands, no matter where you establish care.

If you'd like to search on your own or learn more about various health care providers, you can find information including education, clinical interests and more for Samaritan providers at [samhealth.org/FindADoc](https://samhealth.org/FindADoc). You can also call Samaritan's Find-a-Doctor line at 800-863-5241.

# Look on the bright side: Five tips for optimism



Optimism can play an important role in how healthy you are and how long you may live.

"Part of this is behavioral; an optimist might make different choices than a pessimist," said Raymond Simon, MD, from Samaritan Family Medicine – Geary Street in Albany. "This is particularly important with issues like depression, anxiety and chronic pain."

Being optimistic is a skill you can learn. Try these tips:

1. Find purpose. Work, family, friends, volunteering and more can all help give your days meaning and help you feel more positive about what tomorrow holds.
2. Feel gratitude. Spend a few minutes each day writing down the things you are grateful for.
3. Look for the silver lining. When bad things happen, see if you can find one small good thing that came about as a result.
4. Practice self-care. Do the things that make you feel good, not just for the moment but long term. Exercise, get enough sleep, eat well and see friends.
5. Focus on what you can change. In difficult situations, write down what you can and can't control. Focus on the things you can control to improve the outcome.

"Optimism is a good habit to get into," said Dr. Simon. "It's sometimes not easy to be optimistic, and it would be unrealistic to be this way all the time but pushing for a tendency toward optimism is a good exercise."

*Raymond Simon, MD, sees patients at Samaritan Family Medicine – Geary Street and can be reached at 541-812-5570.*

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The program, C.H.A.N.C.E. 2nd Chance (CTC), focuses on meeting daily needs, reducing health disparities and increasing health engagement for people facing challenges associated with mental health and addiction recovery. The pilot program proved so successful that C.H.A.N.C.E. operationalized it, taking a percentage of its monthly budget and earmarking it to fund CTC services.

In addition to helping administer CTC, Allen also completed community health worker training that was funded through IHN-CCO pilot funds.

"I built some long-lasting friendships with community partners,"

she said. "What I learned applies in my management position in collaborating with community partners."

It's these connections through C.H.A.N.C.E.'s longstanding participation with IHN-CCO's Delivery System Transformation Committee that now leverage the effectiveness of the work it does, from helping people to pay rent and overcome homelessness, to assisting clients attain government-issued identification cards and food handler's licenses.

"It gives small social service agencies like ours a chance to have an equal voice at the table," said C.H.A.N.C.E. Executive Director Jeff Blackford. "It gives power and validity to the work that we do."



# Building *flexibility* together

## Busy mom finds appreciation for the little things

For Audrey DeKam, a mother of two boys and a spunky golden retriever, life's simplest tasks were a challenge.

The trouble started when she was cleaning and reorganizing a storage area in her Albany home.

"In January 2019, my shoulder began hurting very badly and eventually it locked up to where I couldn't move it," said DeKam. "I dropped the project and left the storage area in disarray."

Soon, simple everyday activities like lifting cordless blinds, reaching for a plate in the cabinet and folding sheets were difficult. Sleeping was difficult, too, as the pain was non-stop.

DeKam suspected her painful, limiting condition was frozen shoulder, also known as adhesive capsulitis, as she'd had frozen shoulder on her other shoulder seven years prior. Adhesive capsulitis is a painful, limiting condition that can sometimes resolve on its own.

"I hoped my shoulder would heal on its own over time, like it had on my other side, but it didn't. After doing almost everything one-handed for a year, it was time to do something about it," said DeKam.

DeKam sought help from Lauren Hansen, MD, from Samaritan Medical Group Orthopedics – Albany.

Like many patients, DeKam hoped for a cure without surgery, so Dr. Hansen suggested an image-guided cortisone injection that goes directly into the joint capsule as a first step. After about a week it was clear the injection wasn't helping.

It was suspected that there were bands of scar tissue in the shoulder joint that would not go away without a different treatment, so DeKam and Dr. Hansen discussed other options.

One of those options was manipulation under anesthesia or MUA (pronounced moo-ah).

"I liked the idea of it — a 'closed surgery' with no cutting," said DeKam.

A closed surgery is a procedure where an incision is not made into the skin. Often the technique is used in the reduction of a fracture or dislocation.

Typically, if MUA doesn't work, Dr. Hansen would perform a laparoscopic clean-out of the scar tissue.

DeKam, however, declined the second procedure and opted to try only the MUA.

"I did a lot of research before seeing Dr. Hansen, and I really appreciated the opportunity to respectfully decline any treatment option I wasn't comfortable with," she said. "Dr. Hansen was flexible when it came to me choosing what felt right for me."

The procedure took place on New Year's Eve — which DeKam called a fitting end to an entire year of not using her left arm.

"On the day of my surgery, I felt more like a queen for a day than I did a patient," she said. "I had my own nurse, who was amazing, and everyone at Samaritan Albany General Hospital was so nice."

The non-invasive MUA procedure was a success. Dr. Hansen and her team were able to bring back the full range of motion in DeKam's left shoulder immediately after surgery.

After returning home, DeKam delicately tried out her range of motion on her own after the nerve block wore off.

"I was like, hallelujah! It worked," she said.

DeKam completed approximately six weeks of physical therapy to gently build strength and ensure the joint didn't lose its newly regained agility — or range too far and create a new injury.

Her advice for others: Explore all your treatment options, and don't be afraid of surgery if you need it. She said, "If there are parts of any procedure that don't feel right for you, ask your doctor about alternatives. They are there to guide you in health care decisions that make sense for you."

"Like so many others when it comes to joint surgeries, I find myself thinking that I only wish I'd done it sooner," she said. "It feels great to be able to move my arm all around."

"I can walk my dog, do my own hair, scratch my own back and put on a seat belt with my left arm," said DeKam.

"Going to the bank's drive-up teller is not a problem now. You really miss the simple things when they've been gone for a year."

As for the storage area project, DeKam said, "Well ... I'm getting to it!"

**Learn more and watch a video about Audrey DeKam at [samhealth.org/AudreyD](https://samhealth.org/AudreyD).**



From left to right: Doug Boysen, Marty Cahill and Kelley Story of Samaritan Health Services and Rebecca Grizzle of Lebanon Chamber of Commerce

## New facility signals hope, commitment to a healthier community

Samaritan Treatment & Recovery Services, located inside The Barbara & Larry Mullins Center, held a small ribbon cutting ceremony in mid-July.

“Samaritan’s mission is ‘Building Healthier Communities Together,’ and substance use disorder is a definite barrier to healthier communities,” said Doug Boysen, JD, MHA, president/CEO of Samaritan Health Services. “This building and the services offered within inspire hope and reinforce our commitment to addressing this issue.”

The 16-bed residential treatment facility serves adults 18 and older with serious substance use disorders throughout Oregon — priority is given to patients who live in Benton, Lincoln and Linn counties. An outpatient clinic that Samaritan opened in 2018 also resides within the facility. Together, the services provide resources to treat patients needing the safety and security of a residential care program, as well as outpatient services for individuals that can maintain employment and home life, while seeking services they need.

“I want to express our continued appreciation to our community and to the hundreds of donors that made the completion of this capital campaign for Samaritan Treatment & Recovery Services possible,” said Boysen.

**For more information about Samaritan Treatment & Recovery Services, and to watch a virtual tour of the facility, visit [samhealth.org/Recovery](http://samhealth.org/Recovery).**

## Recovery for substance use disorder, get the facts

By Kelley Story, Operations Director  
Samaritan Treatment & Recovery Services

Substance use disorder is complex, and some information is often misleading. Many addiction myths exist. Let’s examine some common myths and explore facts about recovery.

- Claim:** You must hit rock bottom.  
**Truth:** The recovery process begins whenever someone decides it’s time to change. Hitting rock bottom often makes it harder to regain the footing needed to engage in the recovery process.
- Claim:** After treatment, people return to happy lives.  
**Truth:** Recovery isn’t always fun. It is more complicated than eliminating drugs and alcohol. It’s a process of change where people find purpose and learn to make healthier choices. Many people struggle because their lives were deeply affected.
- Claim:** Lack of morality and willpower cause substance issues.  
**Truth:** Imposing shame on someone can hinder recovery. Substance use is a medical disorder. Recovery brings hope and the belief that challenges can be overcome.
- Claim:** You must want to recover to succeed.  
**Truth:** Some people see treatment as a way to get others off their back. They may even intend to return to drugs or alcohol. Treatment, however, strives to change people’s way of thinking, modify behaviors and adjust their lifestyle. Recovery requires discipline; you “just do it.”
- Claim:** Only one path leads to recovery.  
**Truth:** There are many paths to substance issues and many ways to enter into recovery. People are unique, with distinct needs, strengths, preferences, goals, cultures and backgrounds. These factors impact a person’s recovery.

**September is National Recovery Month** and we want to celebrate those who are on the difficult road to recovery. It takes caring family, friends and a community to offer hope for a better life.

# For Medicare, a little education can help you make the right choices



If you’re approaching age 65, or retirement, it’s a good idea to start thinking about the future of your health insurance coverage. Medicare benefits will create a lot of new opportunities, but will coverage from Original Medicare alone be enough?

You’ve got some decisions to make. Here are a few things to consider which can help you make the right decisions for you and your health.

### Get to know the Medicare timeline

Be aware of these important deadlines as you approach Medicare eligibility.

**Age 64 – or approximately one year prior to retirement**  
Learn how Medicare insurance works — along with what is and isn’t covered under Original Medicare.

**Age 64 + 9 months**  
Enroll early. You can enroll in Original Medicare and a Medicare Advantage plan as early as three months before your 65th birthday.

**Age 65 – retirement**  
Start enjoying your Medicare benefits.

**Age 65 + 3 months**  
Last chance! Make sure you are enrolled to avoid paying a late enrollment penalty.

### Ask yourself questions

- How much health care do you anticipate using next year?
- Will you want coverage for prescription drug costs?
- Are you likely to need health care coverage away from home when you travel?
- Are you willing to pay higher monthly premiums to reduce out-of-pocket costs?

### Ask for help

Medicare can be confusing, and there is a lot to consider. If you have questions, Samaritan has local Medicare experts available and ready to help. Jot down your questions and call 866-747-5267 to receive friendly Medicare advice with no obligation.

You’ll learn a lot, and it will make the Medicare road ahead seem a little less daunting.

# Becky Pape: A career defined by a love of hospitals, leadership through a pandemic and growth of Samaritan

Becky Pape's career has taken her in several directions, from nursing to education to home health. But she always found herself back in the hospital setting.

"I love hospitals," she said. "There's nowhere like a hospital. Every person moves with constant purpose and focus on their part to care for their patients and co-workers. It's exhilarating just walking through the door every day. Knowing so much will happen and being a part of something much larger is absolutely fulfilling."

Pape retires as CEO of Good Samaritan Regional Medical Center later this year. Her 42-year health care career included numerous accomplishments, such as the development of a medical school and trail-building group in Lebanon, preparing the Good Samaritan campus for future growth, multiple leadership awards and hospital leadership through the most severe global pandemic in 100 years.

"The COVID-19 pandemic has been the most challenging situation I've experienced in my career," Pape reflected. "It wasn't my plan, but it's never anyone's plan. It has been fantastic to see everyone come together on this. The leadership from administration and our physicians came together to form a plan to deliver care in a completely different dynamic, and we have adjusted to daily changes. Our people bring their best every single day, thinking of ways to help our patients and their families who couldn't be together because of the pandemic. The community has donated to us, we have donated to our employees and it warms my heart."

Pape, originally from Iowa, began her career as a trauma and intensive care nurse there in 1978. She and husband Tom moved to Oregon and she took an ICU nursing position at Good Samaritan in 1980.

Her long-range plan was to continue nursing while moving into teaching. She did teach nursing full-time but found herself missing patient care.

"I enjoyed teaching, but I needed more," she said. "I decided to get my master's degree in public administration because that fit my philosophy of delivering health care in a nonprofit structure. Budgeting, policy, legal and land use are areas of major concentration in an MPA program and I have relied and built on that foundation."

She attained her MPA degree from Portland State University and then ran a home health agency. Her work included patient care, hiring staff and securing insurance credentialing.

"I basically ran a small business, but I ended up realizing it wasn't 'hospital' enough," she said.

That led her back to Good Samaritan in 1987, where she was chosen to lead the hospital's staff education (now called Professional Development) department. When Good Samaritan and Lebanon Community hospitals merged in 1997 to form the initial Samaritan Health Services, Albany General Hospital followed soon after. In 2001, Pape was appointed Vice President of Patient Services in Lebanon and Albany.

Two years later, Pape was named CEO in Lebanon. She transitioned to the top position at Good Samaritan in 2015.

Since then she has overseen the construction of Samaritan Pastega Regional Cancer Center, conversion of one nursing unit to private rooms only, several internal infrastructure projects, new post-anesthetic care unit and cardiac procedure recovery area, and dual accreditation for Samaritan's Graduate Medical Education programs. A partnership with Stanford University ultimately led to the adding of a hybrid surgery suite and trans-aortic valve surgical program in 2019. In addition, she successfully annexed 17 acres of the North campus property and has completed the necessary Master Plan changes to accommodate future expansion of the main campus.

Her leadership has been recognized regionally and nationally, including Business Leader of the Year in 2008 of the Lebanon Area Chamber of Commerce, and American Hospital Association's Grassroots Champion in 2013 for her work with elected officials on health care issues and community activities. In 2014, she was named one of Becker's Hospital Review's 50 Rural Hospital CEOs to know.

Pape had a key role in the partnership with Western University of Health Sciences and the College of Osteopathic Medicine of the Pacific Northwest, which opened in 2011 across from Samaritan Lebanon Community Hospital.

In addition, Pape has served on the Oregon Association of Hospitals and Health System Board of Directors, she chairs the OAHHS Research and Education Foundation and has chaired the association's Small and Rural Hospital Group. She has also



served on the American Hospital Association's Regional Policy Board.

"Becky has led so many significant initiatives and projects that have made a positive difference in our communities," said Samaritan President and CEO Doug Boysen. "I have always appreciated Becky's compassion, humor, and focused approach as a leader. I am going to miss working with her."

Pape decided earlier this year to retire.

"Personally, I feel this is a good time to step back after working full-time for 42 years, 30 of them with Samaritan," she said. "I have had so many aspects to my career — clinical, teaching and administration — and I'm thankful for all of them."

In retirement, Pape plans to spend more time with her family and her new goldendoodle puppy.

## Laura Hennem named Good Samaritan chief executive officer

Oregon native Laura Hennem is returning to lead Good Samaritan Regional Medical Center in Corvallis. Following a national search, Hennem was named the hospital's chief executive officer in July. She succeeds Becky Pape, who retired after more than 30 years with the organization.



With more than 25 years in health care leadership roles, Hennem most recently helped develop and then served as regional CEO of multiple "neighborhood (micro) hospitals" in southern Nevada. These facilities provide emergency care, inpatient services and related outpatient services in a number of states. Those Hennem developed were part of a joint venture between Emerus and Dignity Health. Over the past 18 months, Hennem split her time between Nevada and Washington, where she worked with MultiCare in the Puget Sound Region to develop and operate innovative health facilities there.

Hennem previously served as chief strategy officer for Dignity Health's Nevada service area, and she also held leadership roles with health care organizations in central and Southern California. She began her career with Providence Health & Services, working for both Providence St. Vincent Medical Center and Portland Providence Medical Center.

"Laura brings tremendous depth and breadth to her new role at Good Samaritan, and we are delighted to have her join our team," said Samaritan President/Chief Executive Officer Doug Boysen, JD, MHA.

"I am eager to join the Good Samaritan Regional Medical Center team and support the team's commitment to its patients and to the community," Hennem said. "Samaritan Health Services and Good Samaritan are deeply focused on meeting the needs of the community, and this has always been my guiding principle as a health care professional."

Hennem, who grew up in the Portland area, received a bachelor's degree in communications from Washington State University and a master's degree in health administration from Virginia Commonwealth University.



## Two Lincoln County hospital projects complete

Samaritan Health Services' hospital construction projects in Lincoln County are drawing to a close. As heavy work vehicles roll away for the last time, it's time to reflect on this accomplishment and thank our communities for their support.

At Samaritan Pacific Communities Hospital in Newport, an impressive multilevel building consolidates most all health services under one roof. The new construction melds with remodeled portions for seamless delivery of care. All work on the campus will be substantially completed in October.

In Lincoln City, Samaritan North Lincoln Hospital was replaced with a single-story structure, which houses most all medical services. Physical Rehabilitation and many non-clinical services were relocated to a nearby building that received an interior face-lift. This project was finished in July.

Both hospitals have a patient-focused design, offer the latest in medical and information technologies, are earthquake-resilient, and offer ample, convenient parking for all.

With social distancing measures in place, plans for grand opening celebrations have been postponed. Because of concerns about the coronavirus, in-person community celebrations will be replaced with virtual and physically-distant activities. Watch for announcements in the local media and on the Samaritan North Lincoln Hospital and Samaritan Pacific Communities Hospital Facebook pages.

Meanwhile, on behalf of all Samaritan employees, we wish to say: Thank you for your patience and support. We couldn't have done it without you!

*Thank you!*

**Above:** Samaritan Pacific Communities Hospital  
**Below:** Samaritan North Lincoln Hospital



## Premier Security makes leadership gift for COVID-19 relief

In March the five Samaritan Foundations came together to establish a new Samaritan Emergency Relief fund to help Samaritan respond to the COVID-19 crisis. This fund provides relief throughout the region at Samaritan hospitals in Albany, Corvallis, Lebanon, Lincoln City and Newport during extreme emergencies, such as COVID-19 or natural disasters, by funding equipment and supplies, hospital operations, research and innovation, as well as efforts to repair and rebuild.



Like many community members, Joseph Carmack, founder and owner of Premier Security based in Eugene, knew he wanted to do something to help in the fight against COVID-19. Carmack runs a locally-minded business committed to safety and security for all, and when he heard about the Samaritan

Emergency Relief fund, he didn't think twice about making a \$50,000 gift.

I have the desire give back," said Carmack. "This is my way of saying 'thank you' for taking a chance on my vision for a security company that could truly be a partner with the organizations we serve. It is an honor to be able to extend my support during this unprecedented time in the world."

Samaritan has always had a special place in Carmack's heart. In fact, Samaritan was Premier Security's first client 10 years ago and the partnership has been going strong since those early days.

"When I first heard about Premier Security's gift I wasn't even surprised because I know that's how Joseph operates — he steps up," said Samaritan Health Services President/CEO Doug Boysen, JD, MHA. "They have been such strong a partner over the years and I'm extremely grateful to Premier for stepping up to help during this pandemic."

**To make a donation to the Samaritan Emergency Relief fund, visit [samhealth.org/EmergencyRelief](http://samhealth.org/EmergencyRelief).**

**Photo:** Joseph Carmack (right), owner of Premier Security, donated \$50,000 to help purchase equipment like these powered air purifying respirators for health care personnel.

"It was incredibly meaningful to me that Samaritan believed in a local start-up company and it's from that gratitude that

## Keeping you healthy



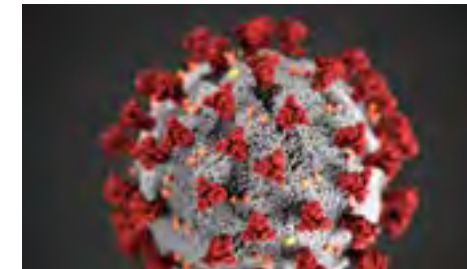
At the time this publication was produced, the majority of Samaritan's ongoing health and wellness classes and support groups were postponed until nationwide COVID-19 precaution measures subside.

**Browse our online directory for updates and current offerings at [samhealth.org/Classes](http://samhealth.org/Classes).**

## Parenting resources



Prepared parents. Healthy families.  
[pollywogfamily.org](http://pollywogfamily.org)



## COVID-19 updates

Find the latest information on COVID-19 and its impact to visitor restrictions, testing procedures and more at [samhealth.org/Coronavirus](http://samhealth.org/Coronavirus).

## Keeping you informed

Sign up for Samaritan's e-newsletters by visiting [samhealth.org/Subscribe](http://samhealth.org/Subscribe).



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# Building *wellness* together

Cancer survivor Shannon Van Deusen (left) and her sister Dawn Knoll (right) take a break during a training run. See story on page 6.



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