

Winter/Spring 2022

heart *to* heart

Your local guide to good health
from Samaritan Health Services



**Surviving was just
the beginning of
COVID recovery for
Albany man**



From the president

Doug Boysen, JD, MHA
President/Chief Executive Officer

Samaritan works with community partners to address broader health needs

Although the pandemic has brought much-deserved attention to the amazing work being done in our hospitals and health clinics, we have also seen how COVID-19 has exposed the stress on the social safety net that helps support our most fragile residents.

The pre-pandemic challenges to accessing stable housing, food, transportation and other supportive services have been made even more difficult as COVID-19 increased social isolation and threatened the ongoing operation of many local nonprofits. This, in turn, has affected the health status of many underserved residents.

To help address these challenges, Samaritan Health Services has strengthened its community partnerships to help connect patients in need to available local services.

For example, Samaritan has identified several primary care clinics to serve as pilot sites for embedding community health workers to assess patient needs for services including food, housing and other social determinants of health. (See related article, page 25.) Community health workers can then facilitate patient follow-up and referrals to local agencies that can provide needed services.

In addition, Samaritan and the region’s coordinated care organization, InterCommunity Health Network CCO, are providing financial and clinical support to expand the number of respite and recuperative beds in the region. (See related article, page 24.) These beds provide transitional housing and supportive services for unhoused, medically fragile patients leaving the hospital — as well as other unhoused community members — to help stabilize their medical needs and avoid hospitalization.

The respite and recuperative services are co-located with other nonprofit partners, many of whom also offer on-site food programs and other services that help foster patients’ overall recovery and improve their health status.

Samaritan will continue to support community health efforts through annual Social Accountability grants, and IHN-CCO will fund similar efforts through Transformation grants and SHARE funds. (For information about these programs, please visit samhealth.org/CommunityBenefit.) Collectively, these grants totaled more than \$2 million in 2021.

The need for collaborative efforts such as these has increased during the pandemic, and we know that none of us can do this vital work on our own. We are grateful for our valued community partners and for our shared commitment to “Building Healthier Communities Together.”

Sincerely,

heart to heart

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Letters to the editor

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Photography note: Several photos in this publication are stock photography and were taken prior to the COVID-19 pandemic. Photos captured by Samaritan were taken using social distancing precautions.

Scan me to learn more!

To use the QR code, open the camera app on your smart phone or other device, scan the image and connect directly to more information on samhealth.org.



Learn to live life well while managing a chronic condition

When Jeanne Heywood, 72, of Corvallis suffered a heart attack and underwent emergency bypass surgery in the winter of 2020, it was unexpected and frightening.

“The cardiac surgeon, cardiologists and the support team did a great job,” Heywood said. “I’m grateful to be alive.”

When she came home from the hospital, she was faced with a new challenge: living with a chronic condition.

“I felt vulnerable, confused and depressed,” Heywood said.

Then a Home Transition Team nurse from Samaritan made a referral for Heywood to visit with a counselor. That’s how she heard about the Living Well with Chronic Conditions workshop. Heywood joined others who suffer from chronic conditions and discovered they have something in common, regardless of their diagnosis.

“I needed support, advice and a positive direction,” she said. “The workshop leaders and participants helped me to find my own path to living well with chronic illness.”

The free, six-week workshop gave Heywood the tools to manage her situation.

“It felt empowering to meet and talk with other people dealing with chronic illness,” said Heywood.

Living with a chronic condition can be difficult, debilitating and draining. But people experiencing chronic illness are not alone. In the United States, six out of 10 people are living

with at least one chronic condition. In Oregon, that’s about 1.8 million people.

Without proper support, people can experience a cycle of worsening symptoms, including fatigue, poor sleep, stress and anxiety, explained Karen Douglas, health education coordinator with Samaritan.



“People with chronic, continuous or persistent physical or mental health issues tend to have a lot of the same symptoms that they have to learn to manage,” Douglas said.

Together with community partners supported by the Regional Health Education Hub in Benton, Lincoln and Linn counties, Samaritan offers quarterly Living Well workshops for people who are ready to gain control, feel better and take charge of their health.

Participants focus on three responsibilities: how to manage their health, continue doing the activities they’ve always done and deal with emotional health issues.

Since the start of the pandemic, Douglas has noticed that more people are struggling with mental health issues.

“A lot of the time, when people reach us, they feel like they are at wit’s end,” Douglas said. “The workshop brings hope back to people who feel hopeless.”

Participants gain a sense of accomplishment by setting goals and having someone who cares asking them how they are doing.

Since taking the workshop, Heywood has taken steps to improve her health. She quit smoking and is walking every day. She encourages others who are newly diagnosed or struggling to reach out for help.

“I found strength and hope,” Heywood said. “I can lead a fairly normal life with a condition like heart disease.”

Living Well with Chronic Conditions workshops are being offered online during the pandemic, in both English and Spanish, and will return to an in-person format when it is safe to do so. Register for an upcoming class at samhealth.org/HealthEdHub, or contact SHSHealthEd@samhealth.org or 866-243-7747.



Tips for thriving with diabetes

Whether you have Type 1 or Type 2 diabetes, managing it can seem overwhelming at times. It's important to know that diabetes affects everyone differently and it's best to work with your health care team to develop a personalized plan.

"The first step in managing diabetes is understanding your blood glucose readings," said Angie Frederic, registered dietitian nutritionist and manager of Diabetes and Nutrition Education at Samaritan Lebanon Community Hospital. "By testing your blood glucose, you can make informed decisions about any changes that might need to be made to ensure healthy diabetes management."

Here are some additional tips for keeping your diabetes under control.

- Monitor your blood sugar daily to help stay on track.
- Take a diabetes class or work with a diabetes educator.
- Stay active by taking a 30-minute walk every day.
- Understand your medication and talk to your doctor when you have questions.

- Know what makes your blood sugar go up or down.
- Eat regular, well-balanced meals. Visit myplate.gov to learn what foods should fill your plate.
- Find ways to reduce stress.
- Get plenty of quality sleep each night.
- Be patient with yourself.

"Diabetes management can change over time and what you have been doing sometimes needs to be adjusted," said Frederic. "It is easy to get burnt out. Making small adjustments in your diet or routine can help you feel more successful."

One last tip: Focus on what you can eat instead of what you can't. And enjoy it!

For more information on how to take control of your diabetes, visit samhealth.org/Diabetes.



Long-haul COVID makes recovery slow for local survivors

For many survivors of COVID-19, the disease continues to take a toll after initial recovery.

Commonly known as “long-haul COVID,” the condition includes continued symptoms such as cough, joint and chest pain, fever, dizziness, loss of smell or taste, fast heart rate, fatigue and shortness of breath. Initial studies of the condition indicate that the virus can cause lasting tissue inflammation, which leads to the long-haul symptoms.

“We are still learning so much about COVID-19. There is 10 times more unknown than what is known,” said pulmonologist James Knight, MD.

Early research showed some positive results with decreased symptoms when patients with long-haul symptoms received the COVID-19 vaccine.

But besides supplemental oxygen and pulmonary rehabilitation, there isn’t much that can be done to speed recovery. (At the time of publication, the FDA was considering emergency use authorization of a promising oral antiviral medicine that may help some with COVID-19 avoid hospitalization.)

“It’s a roll of dice right now to determine who recovers and how much recovery will be gained. It’s scary,” Dr. Knight said. “Pulmonary rehabilitation can help, and we try to get all of our patients into that program after significant COVID-19 lung infections.”

Mike Dean, 37, spent 35 days in the hospital in July and August of 2021. Two months after he returned home, Dean said it felt like he’s at half-strength.

“I can do 100% of my day-to-day stuff. But with any physical exertion, it’s just not there. I tried to do a half-mile walk and I had to stop and take a break. Stairs are the worst.”



After missing three months of work, Dean started back part-time and has begun pulmonary rehabilitation.

Matt Umberger (see related story, page 12) and Mike Dean, both of Albany, spent time in the intensive care unit at Good Samaritan Regional Medical Center with COVID-19.

A year after Umberger’s hospitalization, he still was not fully recovered.

“I can max it out on the cardio machine for 45 minutes, but if I’m carrying my canoe or kayak with my son when we go fishing, I have to sit down for five minutes,” Umberger said. “My muscles are still trying to recover. I’m pulling that oxygen in my lungs, and I’m just not able to keep up yet.”

Respiratory Therapist Joanne Rauenbuehler runs the pulmonary rehabilitation program at Good Samaritan Regional Medical Center. She said the most common symptoms are shortness of breath, needing supplemental oxygen, fatigue and cardiac arrhythmias.

Some patients with long-haul symptoms need seven to eight months of rehabilitation, while others take less time.

“Many people don’t know where to start,” Rauenbuehler said.

At pulmonary rehabilitation, trained staff work with patients to address the issues that contribute to shortness of breath: how well the lungs move in and out, how well the heart pumps and how well muscles utilize oxygen.

“All of these can be improved with exercise,” she said.

Visit samhealth.org/Together to see Mike Dean and Matt Umberger talk about their fight to conquer COVID-19.

Photo: Mike and Tory Dean take a walk with their children (From left: Hayes, Marcus and James).

Visit samhealth.org/GetTheVaccine to learn more about scheduling your COVID-19 vaccination or booster.

Partial hospitalization program offers vital mental health treatment

Treatment for a severe mental health crisis doesn't necessarily require a stay in the hospital or an inpatient unit.

Samaritan Health Services' Partial Hospitalization Program serves eligible patients whose conditions are impacting their lives, while allowing them to be home with their families at night.

"In general, partial hospitalization is designed to prevent inpatient admission while providing treatment in a less restrictive manner," said James Douglas, MD, medical director of Mental Health Services at Good Samaritan Regional Medical Center. "A patient can also be referred for partial hospitalization as they are transitioning out of inpatient care, or to stabilize acute psychiatric conditions to prevent them from worsening."

Dr. Douglas said that most psychiatric disorders are eligible for partial hospitalization. Patients who can remain stable and free from self-harm at night and

on weekends are eligible. Patients must also be able to participate in group therapy, which is one of the main components of the program.

Samaritan initially launched the program on the Corvallis hospital campus in 2020 but had to suspend it due to the COVID-19 pandemic. The program relaunched in mid-2021 and has seen several groups of patients graduate since.

The program runs on 21-day cycles with five hours of therapy offered each weekday. Patients can continue into the next cycle if needed.

"We have seen a majority of our patients benefit from the program, and several have said that the program saved their lives," Dr. Douglas said. "Several have also said that they wish this type of treatment program was available earlier in the course of their illness."

Visit samhealth.org/PHP to learn more.



Cardiology specialist honors patient

Larry Samples, 62, of Philomath, died Nov. 4, 2020.

But before that day, he was “gone fishing.”

It began when a medical provider and his patient realized they were both fishermen.

Samples was at an appointment with Brian Oakes, FNP, at Samaritan Cardiology – Corvallis. He was diagnosed with congestive heart failure in 2017, a serious condition in which the heart doesn’t pump blood as efficiently as it should. Even with the best treatment and careful management of the disease, half of those with severe heart failure die within five years of diagnosis.

It can be scary for patients who face those odds and humbling for the clinicians who care for them.

When Samples visited Oakes their conversations often veered from the topic of medicine.

Samples would share fishing photos and brine recipes for smoked fish. He talked about the fishing trip he once took to Alaska. Oakes told Samples about his adventures in Petersburg, Alaska, where he previously worked, and how he still goes fishing there every summer.

One day, Oakes was talking to Samples about preparing for the end of his life and checking things off his bucket list.

“I always hoped that I could go back to Alaska,” Samples said.

“If you can get there, I will take you fishing,” Oakes replied.

Oakes and his wife, Breanna Oakes, RN, own a boat and were already planning their summer trip with friend

Beau Frenzel, RN, who knew Samples from when he was a patient at Good Samaritan Regional Medical Center in Corvallis. Plus, Samples’ wife, Debby Gavegan, RN, would also make the trip. He would be surrounded by medical professionals, Oakes reasoned.

That, and there’s really only one response when a friend tells you that he wants to go fishing.

“We’re gonna make it happen,” Oakes said.

Even as they made plans, Samples suffered another setback and was hospitalized in the spring of 2020. When he returned home, he needed to use a walker and carry oxygen. He also began hospice care.

From a medical perspective, there wasn’t anything more that Oakes could do. But he could provide a once-in-a-lifetime experience to a fellow fisherman.

The desire to go fishing put a lot of light in Samples’ life during his last year.

When they arrived in Petersburg, it was perfect weather with calm seas. It took a lot just to get Samples in the boat. But once they were on the water, surrounded by snow-capped mountains in a pristine environment, everyone had fun.

“We were catching fish left and right,” Oakes recalled.

Samples had a hard time reeling in the fish, but he would fight them and pass the pole back and forth to others for assistance.

“He was giving it his all,” Oakes said.

ent's wish — go fishing in Alaska

When they returned from Alaska, Oakes would stop to visit Samples at his home in Philomath. They always ended up talking fishing.

Oakes felt a kinship with Samples, who worked as a logger and then a forklift driver at a lumber company. Oakes grew up in a timber family in Monroe surrounded by people who worked in rugged professions. He knew many people who suffered from heart disease. It's what led him to pursue his specialty.

Samples is the first and — thus far — the only patient Oakes has taken fishing. When he returned to Petersburg last summer, Oakes brought some of his former patient's ashes to spread at sea. He reflected on the prior summer and how some days they didn't catch as many fish.

But that's how it goes when you're fishing. Sometimes, it's not the fish you are after.



Above: Beau Frenzel, RN, left, Larry Samples, center, and captain Brian Oakes, FNP, right, fishing in Petersburg, Alaska.

What to do about heart failure

Heart failure doesn't mean your heart has stopped. Rather, it means it isn't pumping blood as well as it should.

"We often see heart failure when there is damage over several years from conditions like high blood pressure, diabetes or obesity," said Tracy Randleman, RN, a clinic care coordinator at Samaritan Heart Center.

Conditions like coronary artery disease, valvular heart disease or arrhythmias can put you at a higher risk for heart failure.

Some conditions weaken the heart and others make it stiffer, but the end result is that the heart has to work harder to pump blood and becomes less efficient at getting blood to vital organs and tissue.

Early in the process of heart failure, the body tries to compensate. The heart may enlarge or develop more muscle to pump more blood, or it may begin to pump faster. These solutions are only temporary.

"You may not notice symptoms for several years," said Randleman. "Regular checkups with your primary care provider, even if you feel fine, is one of the best chances of early diagnosis and management of heart failure."

As the heart becomes weaker, symptoms become progressively worse. You may begin to notice tiredness, shortness of breath or swelling in your legs or ankles. It can be easy to overlook symptoms or blame old age, but heart failure can be managed if it is found early.

"Heart failure is treatable and with lifestyle changes and medication, most people can maintain a fairly high quality of life," said Randleman.

If you are diagnosed with heart failure, your doctor may recommend lifestyle changes:

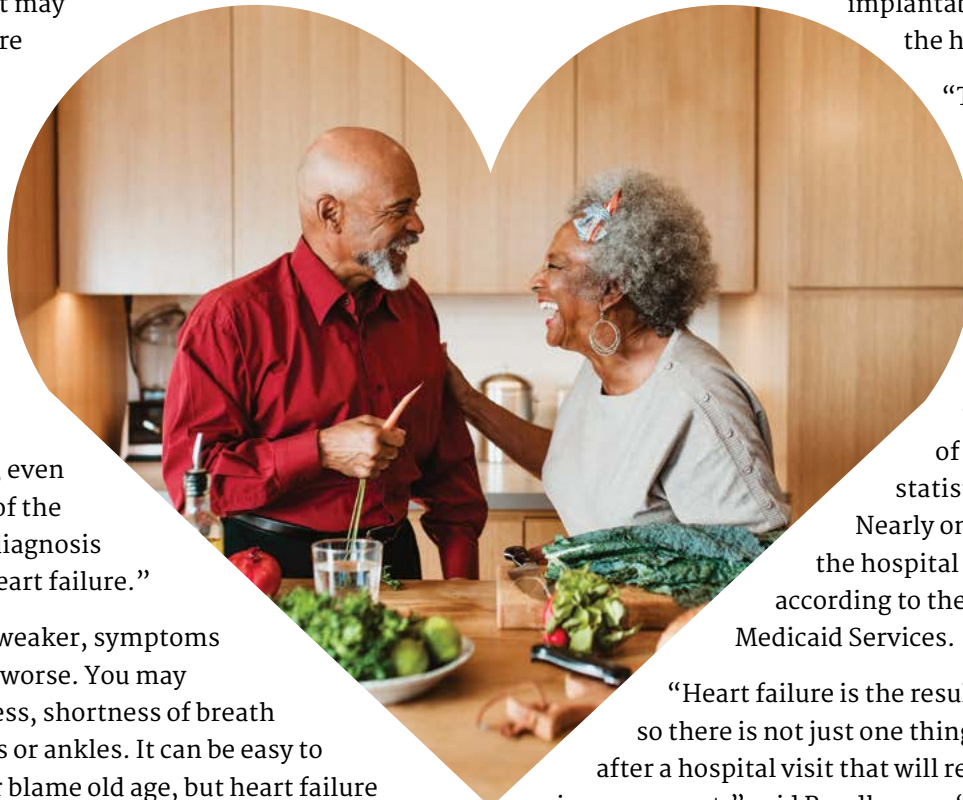
- Adopt a heart-healthy Mediterranean-style diet, like the DASH diet.
- Exercise every day for at least 20 minutes. If your energy is very low, you may benefit from cardiac rehabilitation in a medically safe environment.
- Maintain a healthy weight.
- Manage conditions such as high blood pressure and diabetes.
- Quit smoking.

Your doctor may recommend medications to lower blood pressure or help your heart beat stronger. Severe cases of heart failure may require surgery for a pacemaker or implantable device to regulate the heartbeat.

"The long-term outlook for people with heart failure depends a lot on how well they manage their other conditions," said Randleman.

If you are admitted to the hospital because of heart failure, the statistics are sobering: Nearly one in four will be back at the hospital within a month, according to the Centers for Medicare & Medicaid Services.

"Heart failure is the result of years of damage so there is not just one thing people can change after a hospital visit that will result in a quick improvement," said Randleman. "One of the goals before leaving the hospital is for patients to understand their condition and know what tools are available to them so they can take better care of their hearts."



Samaritan Heart Center provides a wide range of advanced cardiology and cardiac surgery services. Our affiliation with Stanford Health Care provides access to even more life-saving cardiac procedures for local patients. For more information, visit samhealth.org/Heart or call 888-263-6092.



CAN **ANGER** AFFECT YOUR HEART HEALTH?

Anger is a normal human emotion and can serve a useful purpose, but if you frequently “blow your top,” it may affect your heart health.

“Anger causes a flood of adrenaline, preparing your body for danger by raising blood pressure, heart rate and breathing, and making blood more likely to clot,” said Jeremy Warner, DO, from Samaritan Cardiology – Corvallis. “This can weaken artery walls and raise the risk for heart disease.”

Research suggests that in the two hours after an angry outburst, the risk of angina, heart attack, stroke or a risky heart rhythm increases.

“The best ways to prevent heart disease are to control risk factors like smoking, blood pressure, cholesterol, weight, exercise and diabetes,” said Dr. Warner. “However, our emotions impact health, so attending to stress is also important.”

Studies show that chronic stress – which can include strong emotions like anger, anxiety and depression – can hurt the heart.

“If we are on high alert for an extended period of time, it takes a toll on the body,” said Dr. Warner. “It’s important to learn constructive ways to express anger and minimize stress.”

Try these tips from the American Psychological Association:

Relax

Detach from the intensity of the moment by counting to 10 or briefly leave the room. Try repeating a mantra to yourself, something like, “Everything will be OK.”

Avoid “all or nothing” thinking

In heated moments, we can think the worst is happening. Usually, it’s not. Tell yourself, “It’s frustrating, but not the end of the world.” Ask yourself if this will matter next year, or even next week.

Respond slowly

Don’t say the first thing that pops into your mind. Take a break to get your thoughts in order and allow emotions time to cool off. Consider responding tomorrow or after a workout.

Get help

Take an anger management class or talk with a mental health professional to learn techniques to feel more in control of your reactions. Ask your health care provider for resources or a referral.

Jeremy Warner, DO, is a cardiologist with Samaritan Heart Center. He can be reached at 541-768-5205.

Pacemaker can improve lives for those with heart failure

For some patients living with congestive heart failure, a special pacemaker may improve quality of life.

“One problem with heart failure is that the lower chambers of the heart, the ventricles, don’t pump synchronously, or in rhythm which prevents the body from getting the amount of blood it needs,” explained Jeff Hsing, MD, an electrophysiologist with Samaritan Heart Center. “When this happens, people sometimes feel weak, fatigued and short of breath for everyday activities. For some, a cardiac resynchronization therapy (CRT) pacemaker can change that.”

Once surgically implanted into the body, the pacemaker sends out electrical impulses to the heart muscle helping to synchronize the two lower heart chambers, so they pump blood more efficiently.

“We’ve found that a CRT pacemaker can improve people’s quality of life,” said Dr. Hsing.

CRT pacemakers help a person’s heart pump blood better, which can allow them to do activities easier, and can decrease the work of the heart muscle, which can help them live longer.

Not everyone is a candidate for the procedure, however.

“Whether a pacemaker will help a patient depends on a number of factors such as the quantity of blood their ventricle pumps, how bad their symptoms are, and whether their heart’s electrical system is dyssynchronous, meaning not beating in rhythm, based on their electrocardiogram,” Dr. Hsing said.

Implanting a CRT pacemaker requires minor surgery. The patient is usually sedated but awake and is discharged from the hospital the same day.

Once implanted, the CRT pacemaker works with the heart to regulate pumping.

“The pacemaker sits in the upper chest and connects to three thin wires that go into different chambers of the heart. The pacemaker sends a painless electrical signal through these

wires into the heart muscle to synchronize the two chambers to more efficiently pump blood,” Dr. Hsing explained.

While cardiac synchronization therapy can positively impact a person’s heart efficiency and energy level, it does not cure heart failure, noted Dr. Hsing.

“A person will still have heart failure, which is a progressive disease, but once medication has done all it can, a CRT pacemaker is the next step to allow patients to live longer with better quality of life,” Dr. Hsing said.

Jeff Hsing, MD, is an electrophysiologist with Samaritan Heart Center. He can be reached at 541-768-5205.





Dial up the essential nutrients of omega-3s

Omega-3 fatty acids are essential nutrients that can be found in a variety of food.

There are three main types of omega-3 fatty acids: alpha-linolenic acid (ALA), docosahexaenoic acid (DHA) and eicosapentaenoic acid (EPA). ALA is found in plant-based foods like nuts, seeds, fruits and vegetables. DHA and EPA are often called the marine omega-3s since they are found mainly in marine plants and animals like fish and seaweed.

“All types of omega-3 fatty acids help your body by supporting cell function and reducing inflammation,” said Emily Isaac, registered dietitian at Samaritan Lebanon Community Hospital. “Eating foods that are rich in omega-3s has also been associated with improved heart health and brain function.”

Good sources of omega-3s include:

- Herring.
- Mackerel.
- Salmon.
- Trout.
- Flaxseed oil.
- Chia seeds.
- English walnuts.
- Ground flaxseed.
- Canned tuna.
- Canola oil.
- Soybean oil.

In addition, try other foods such as oysters, shrimp, lobster, tuna, legumes, omega-3 fortified eggs, avocado, pecans and cashews. Cooked vegetables are another source: broccoli, Brussels sprouts and spinach all contain moderate amounts

of omega-3s that can add up to be good sources if you eat them consistently in your diet.

To add more omega-3s to your diet, try these simple tips:

- Use canola oil instead of vegetable oil for cooking.
- Add walnuts and other nuts to your snack rotation.
- Sprinkle your morning oats with a few chia seeds or ground flaxseed.
- Choose fish instead of red meat or poultry twice a week.
- Fill half of your plate with vegetables at mealtimes, especially leafy greens.
- Add flaxseed oil to smoothies or in homemade salad dressing.

“Foods with omega-3s in them taste good and have a number of health benefits, so don’t shy away from adding these foods to your plate,” said Isaac.

Give your shopping cart an omega-3 make-over and add nutrient-rich food to every meal.



Building *motivation* together

Surviving was just the beginning of COVID recovery for Albany man

It had been four days since Matt Umberger, 52, of Albany was admitted to Good Samaritan Regional Medical Center with severe complications from COVID-19.

He received oxygen and antibiotics, and doctors moved him to the prone position so he could breathe easier. But he was getting worse. Much worse.

The nurse at his bedside, Brandy Tyler, RN, caught the look in his eyes.

“I can tell that you are tired,” she said with kindness.

It was time. He didn’t think he could live another day. His only option was to trust his doctors and be placed on a ventilator to breathe for him.

At that time, the odds were against him coming off the ventilator alive.

“Tell my wife I love her and my kids, too,” Umberger said to Tyler.

Then he thought, I can’t leave anyone out.

“And my sister and parents,” he added.

Then everything faded.

On Oct. 6, 2020, Umberger woke up with what he thought were flu symptoms. He didn’t think it could be COVID because he had been careful to wear a mask. But his symptoms persisted another three days until he got tested. It was confirmed positive on Oct. 12. Umberger still thought he could quarantine and recover at home.

But then he spiked a fever of 104.1 degrees. His stepson found him sleeping outside on the front porch, trying to cool down. At 2 a.m. on Oct. 15, Umberger woke his wife.

“I need you take me to the hospital,” he said.

Dropping him off at the Emergency Department was the last time Tara Umberger saw her husband for 26 days.

Umberger was critically ill and would spend eight days on a ventilator in the ICU.

Before a vaccine was available, the ability to save patients was less than it is today. If a patient had to be put on a ventilator, the mortality rate in U.S. hospitals then was 80%. Although, at Good Samaritan ICU, patient outcomes were often better.

Like other patients hospitalized with COVID, Umberger was given steroids to help his body recover. Additionally, care teams tried to prevent complications by maintaining IV nutrition and avoiding pneumonia infections, skin breakdown and blood clots with bedside care.

He recalls softly spoken words of encouragement about his family.

“They’re pushing for you, Matt. They’re waiting for you to get better,” he heard.

He remembers being asked to try to breathe on his own. But he would panic, and alarms would sound. Then he would fall back asleep.

They woke him a fourth time to try the breathing test.

“We’re going to turn off the machine to see if you can breathe on your own,” he heard. “Just relax.”

He waited for the test to start.

“OK Matt, we’ve had the ventilator off and you’re breathing on your own,” he heard.

Pulmonologist James Knight, MD, leaned down.

“Congratulations, Matt. You kicked COVID’s butt,” he said.

“Does that mean I get to go home now?” Umberger asked.

“No,” Dr Knight replied. “It means the easy part is over. Now begins the rest of your journey to recovery.”

“I had no idea what he meant,” Umberger recalled.

Over the next eight months, he would learn that his doctor was right. Surviving was just the beginning.

Umberger recalled a motivating conversation with a nurse on his care team.

“I am here to help you get better so you can take care of yourself,” Joe Pyles, RN, explained.

It was like flipping a switch. From that point, Umberger worked hard at his recovery.

When he came home from the hospital, he needed his wife’s help to walk to the bathroom. In four weeks, he had lost 60 pounds, and his legs were weak. He relied on supplemental oxygen for several weeks.

“I felt like a 95-year-old man,” he said.

Umberger started pulmonary rehabilitation and eventually graduated to working out on his own three days a week. He continues to receive follow-up care from Samaritan Medical Group Pulmonology – Corvallis and takes medication to repair the damage to his lungs caused by COVID. There are some activities that still make him winded and cause his oxygen level to drop.

But Umberger considers himself lucky. After missing nearly four months from work, he was able to return in January 2021. By the spring, he resumed fishing and other recreational activities.

“Now, I feel like my age again,” he said. “But I’m not 100% yet.” (See related story, page 4.)

Since Umberger was hospitalized, there have been some developments in treatment. But the medical community still does not understand why some people without underlying health conditions become severely ill from COVID. And doctors are still not able to save everyone, including Umberger’s mom, Nancy Umberger, of Toledo, who died Oct. 14, 2021, of complications due to COVID.

Before he was hospitalized, Umberger didn’t fully comprehend how serious COVID was.

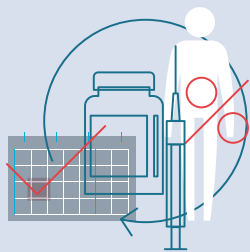
“I thought it was overblown,” he said.

Now he knows better, and he is motivated to share his story in hopes that others can stay healthy. As soon as he was eligible, Umberger received the COVID-19 vaccine.

“I’m not sharing this experience to gain sympathy,” Umberger said. “I’m sharing it because it’s important to understand the severity with which COVID-19 can hit you and the importance of safety protocols to slow or stop the spread of the disease.”

Learn more about Matt Umberger and watch a video of him describing his battle with COVID-19 and his eventual reunion with his care team at samhealth.org/MattU.

Vaccines: How do they work?



The first human vaccine was developed in 1796, which ultimately led to the elimination of smallpox — a painful, disfiguring and often deadly disease. Now, 225 years later, there are protective shots for more than three dozen diseases, each one created to reduce human suffering.

But how do vaccines work? The simplest explanation is that vaccines teach your immune system to fight against certain germs and viruses which cause diseases such as bubonic plague, rabies, Ebola and measles, to name a few. When parts of a virus or germ are inserted into your body, your immune system reacts by producing antibodies to fight the disease. Often, these antibodies continue to protect you from future exposures to the disease.

Scientists have developed several types of vaccines that work in different ways to prevent or lessen disease, including:

- **Inactivated vaccines.** These use the killed version of the germ that causes a disease. These types of vaccines have been developed to protect against hepatitis A, the flu, polio and rabies.
- **Live vaccines.** These use a weakened form of the germ that causes a disease. Just one or two doses of most live vaccines can give lifelong protection against such diseases as measles, mumps, rubella, chickenpox and others.
- **Messenger RNA vaccines.** These vaccines, also called mRNA vaccines, have been studied for decades, but have gained notoriety as the technology behind some of the COVID-19 vaccines now being used. These vaccines work by making proteins that trigger an immune response. Because they do not contain live virus, there is no risk of causing the disease in the person getting vaccinated.

No matter how they are made, vaccines are overwhelmingly safe. According to the U.S. Department of Health & Human Services, most people will have only mild, short-term side effects after receiving a shot, and just one to two people out of a million will have a serious allergic or other reaction to a vaccine.

For more information, visit samhealth.org/HealthLibrary and search for “immunizations.”

Key milestones leading up to the newest vaccine technology – mRNA

The history of mRNA vaccines

Today’s success with mRNA vaccines against COVID-19 comes from the decades of research that came before it.



1980s: Love those lipids

Researchers study the nature of lipids, which lays the groundwork for using lipid nanoparticles in mRNA vaccines many decades later.



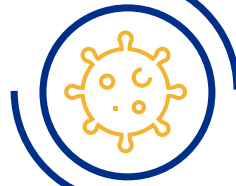
1990s: Failing forward

Could synthetic forms of RNA be used in medicine? The potential seems endless, but so do the challenges. Failed experiments still build knowledge.



2000s: And we’re off!

In 2005, scientists figure out how to make synthetic RNA safe for injection into cells. Research in the field accelerates.



2010s: Smarts and spikes

After outbreaks of other coronaviruses in 2003 (SARS) and 2012 (MERS), scientists study how the “spike protein” works and how it could be used in vaccines.



2020: Success!

Vaccines tested, approved and distributed

Source: *Canadian Institutes of Health Research.*

Kids and pet chores — age matters

It goes without saying that families love their pets for their wagging welcomes and late-night cuddles. But, there's another benefit: helping children to develop responsibility.

“Along with appropriate parent or caregiver supervision and role modeling, learning to care for a pet is a great way for children to develop responsibility, social skills and self-confidence,” according to Liz Varley, DNP, from Samaritan Lebanon Health Center, where she provides primary care services for people of all ages.

In addition to companionship, having a pet can provide opportunities to teach your children about responsibility. But when and what pet responsibilities can your child handle?

Toddlers will likely have immense curiosity surrounding the family pet and may want to “help.” Let them help with simple tasks such as scooping dry food into a bowl or tossing a ball in the backyard to help exercise your dog. While these tasks can offer a sense of independence, it's important that children in this age range and younger always have adult supervision around animals.

Children of elementary school age can take on greater responsibilities such as feedings, cleaning cages, putting away pet toys, and everyone's favorite, emptying and cleaning the litter box. However, be sure to remind your child of proper hygiene after completing their pet responsibilities.

As your child enters their teenage years, you can add walking the dog to their list of chores — assuming they can maintain safe control — or baking healthy treats for your four-legged family members.

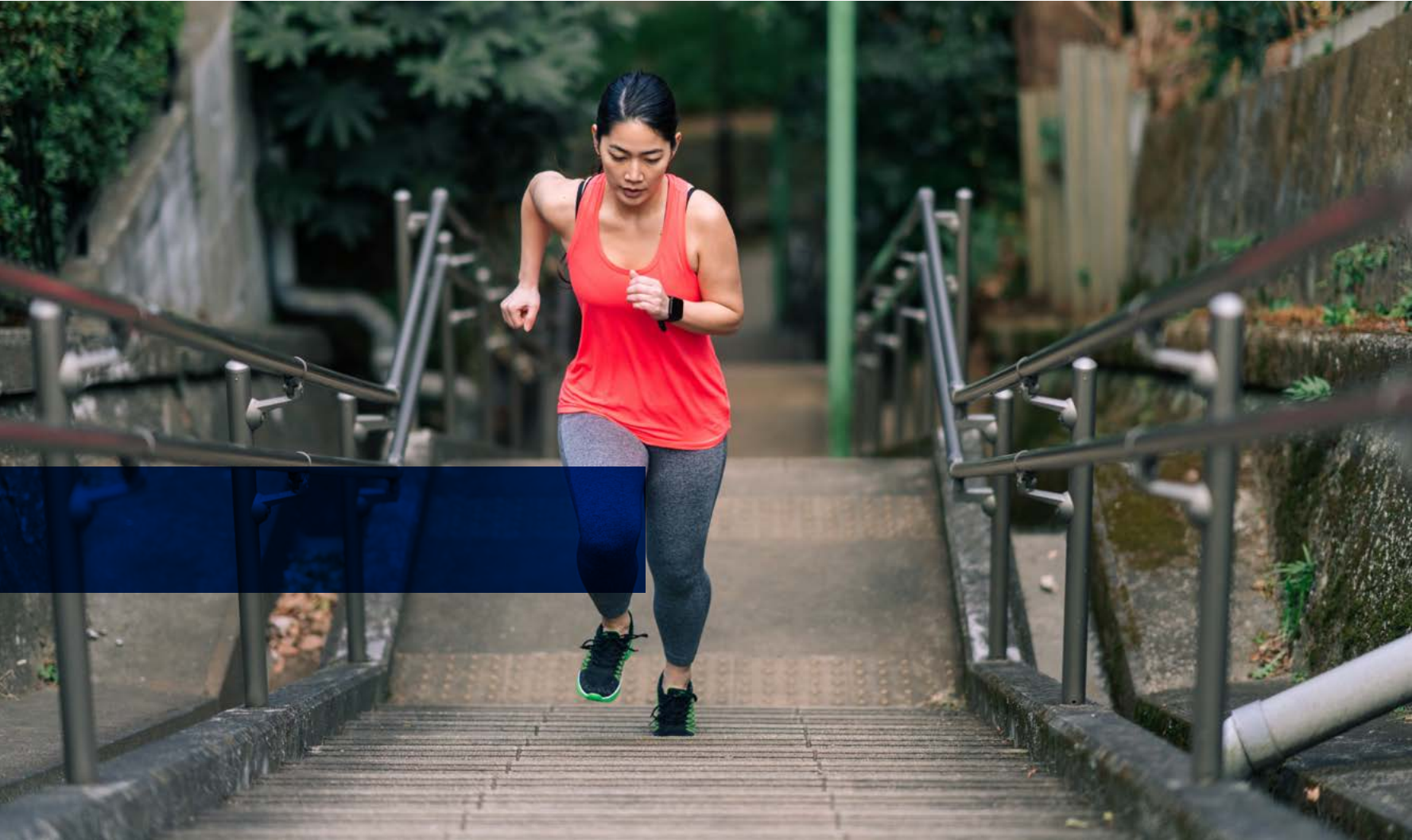
Looking for a pediatrician or family medicine provider? Visit [samhealth.org/FindADoc](https://www.samhealth.org/FindADoc) or call 800-863-5241.

Fun fact: Pet adoptions boosted by pandemic

According to a survey conducted by the American Society for the Prevention of Cruelty to Animals, 1 in 5 households acquired a cat or dog since the beginning of the COVID-19 crisis. Reasons ranged from needing companionship to remote working making it easier to train a new pet.



Athletes aren't all the same – ACL repairs shouldn't be, either



A sudden stop. A twist. A blow to the knee. These are some of the common ways an injury can occur to the anterior cruciate ligament (ACL).

It can happen to someone playing in the adult tennis league, as well as professional athletes in the National Hockey League.

Samaritan orthopedic and sports medicine surgeon Christopher McCrum, MD, the new orthopedic consultant for sports injuries with Oregon State University athletics, has treated patients at all levels, including a fellowship with the team physician for the NHL's Pittsburgh Penguins during their 2017 Stanley Cup Championship season.

With ACL injuries, the outcome Dr. McCrum is working toward remains the same, whether he's helping someone to resume daily activity or working with an elite athlete. And the same evidence-based treatments used to care for injured athletes are available to help patients at Samaritan Athletic Medicine Center.

“My goal is getting people back to their highest functional level,” he said.

Diagnosis, decisions

To diagnose an ACL tear, an X-ray is taken to rule out injury to the bones. Then an MRI scan can confirm a tear and look for other soft-tissue damage.

There are many good treatment options, including nonsurgical rehabilitation. Not everybody needs an ACL to live day-to-day life, Dr. McCrum said.

“Some people are able to run and jump,” he said. “For others, even getting out of the car or pivoting in the kitchen is enough not to be able to cope.”

In athletes who play sports like soccer, basketball, football or volleyball, the knee isn’t stable enough without the ACL intact.

“Particularly with young people, there’s a big advantage to repairing the ACL,” Dr. McCrum said. “If the ACL is deficient, you could end up injuring other parts of the knee.”

Reconstruction options

A surgeon takes tissue from somewhere else in the body or uses cadaver tissue to reconstruct the ACL. For older patients and older athletes, cadaver tissue can be a good choice because this method allows for a quicker recovery period. In younger athletes at higher risk of reinjury, there are three different graft tissue choices for ACL reconstruction: the quadriceps tendon, the patellar tendon and the hamstring.

The quad tendon graft is one of Dr. McCrum’s preferred choices for younger athletes. He makes a small incision over the thigh to harvest a strip of the quad tendon. This method has a low failure and re-tear rate, and people tend not to experience pain kneeling after surgery.

“It’s the most common one I do because of the risk and benefits,” he said.

The other most common graft for athletes is the patellar tendon. During surgery, a piece of bone is removed from both the kneecap and the tibia, along with a strip from the patellar tendon.

“The patellar tendon graft is the most common used by professional athletes,” Dr. McCrum said. “It’s tried and true, and we have really good long-term outcomes.”

But with a patellar tendon graft it can hurt to kneel after surgery where the pieces of bone were removed. That’s why Dr. McCrum prefers the quad tendon graft.

Another soft tissue graft option is the hamstring. This can be a good choice for people who have quadriceps weakness. Because bone is not removed, there is no worry about kneeling pain.

Dr. McCrum discusses the options so that patients understand the pros and cons.

“People are generally in-tune with their own bodies and can make a good choice,” he said.

Surgery, recovery and rehabilitation

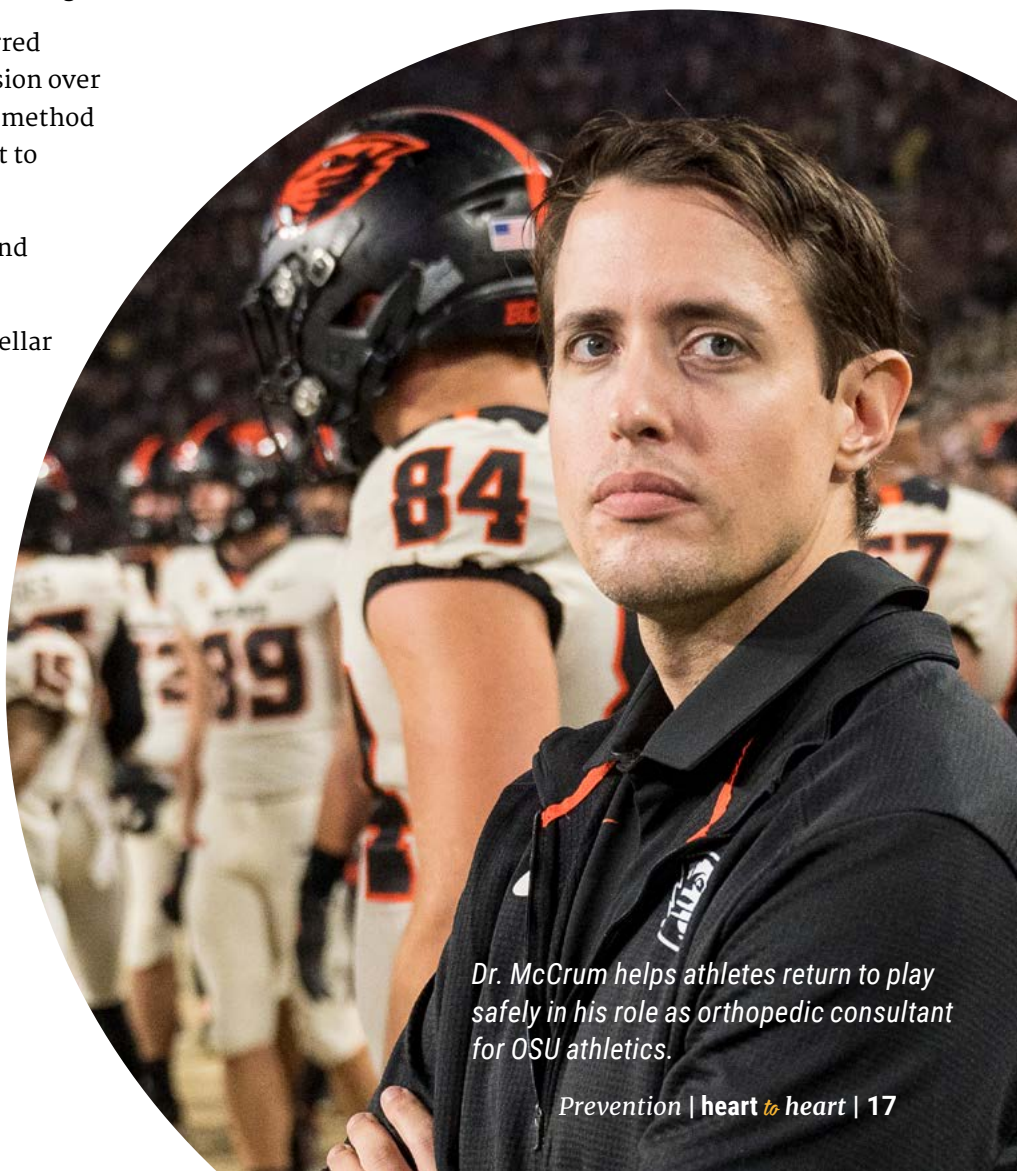
Surgeons prefer to wait for swelling in the knee to go down and range of motion to return before reconstructing the ACL. Reconstructive surgery is performed as an outpatient procedure, which means a person can go home from the hospital the same day.

The anesthesiologist can use a procedure called a nerve block to numb the nerves around the knee to make it more comfortable. Patients start rehabilitation right away.

“It’s not a be-cooped-up-in-bed-type of surgery,” he said. “It’s a get-back-on-your-feet-and-get-going surgery.”

Depending on if the surgery was ACL-only or more involved, expect to use crutches for two to six weeks. Most people are back to full participation in their activities within a year, sooner for some high-level athletes.

“In sports medicine, we perform lifestyle saving surgery,” he said. “I want you to get back to the activities you enjoy.”



Dr. McCrum helps athletes return to play safely in his role as orthopedic consultant for OSU athletics.



Hearty, healthy cauliflower leek soup

By Suzanne Watkins, registered dietitian, Samaritan Albany General Hospital

The cooler temperatures have settled in and there's no better way to warm up than with a delicious bowl of soup. This plant-based, heart-healthy recipe is a crowd pleaser for all ages.

Prep time: 10 minutes | Cook time: 40 minutes (stovetop preparation) | Servings: 6

Ingredients:

- ❑ 2 tablespoons olive oil.
- ❑ 3 cloves garlic, minced.
- ❑ 1 head of cauliflower, broken into florets.
- ❑ 3 medium-sized Yukon gold potatoes, diced.
- ❑ 2 leeks, just the white and light green parts, chopped.
- ❑ 5 cups low sodium vegetable or chicken broth.
- ❑ 1 teaspoon ground pepper.

Nutrition information (per 14-ounce serving): calories 160; total fat 5 g; saturated fat 0.5 g; trans fat 0g; cholesterol 0g; sodium 135 mg; carbohydrates 26 g; fiber 2 g; total sugars 4 g (added sugars 1 g); protein 4 g.



Find more healthy recipes at
samhealth.org/RecipeMinute.

Stovetop directions:

1. Preheat oven to 400 F. Spread cauliflower, potatoes and leeks on a cookie sheet and coat with olive oil and garlic. Roast for 20 to 30 minutes, stirring vegetables halfway. Remove vegetables when they start to brown.
2. In a large pot, add roasted vegetables, broth and ground pepper and bring to a simmer. Use immersion blender to blend soup until smooth.

Slow cooker directions:

1. Grease slow cooker with olive oil. Place cauliflower, garlic, leeks, broth, potatoes and ground pepper in slow cooker and stir to combine.
2. Cook on high for 3 to 4 hours, or on low for 6 to 8 hours.
3. Use immersion blender to blend soup until smooth.

Electric pressure cooker directions:

1. Set electric pressure cooker to sauté. Add olive oil, leeks and cauliflower and sauté until vegetables are soft, about 5 minutes. Add garlic and cook until it becomes fragrant, about 1 minute.
2. Add potatoes, broth and ground pepper to instant pot. Set pressure on high and cook for 8 minutes. Once finished, turn valve to quick release.
3. Use immersion blender to blend soup until smooth.

Maximize all your health plan has to offer

Many health plans offer services that can benefit their members. Health plans generally include information about these services on their website and in materials emailed or mailed to members. To find out what your health plan offers, browse its website or call the customer service line and ask.

A common service included in health plans are wellness programs. These vary considerably from plan to plan. Wellness programs often have incentives when you complete different learning courses or health challenges. Some have resources to help you learn healthy and active habits. Another type of wellness service is a Health Risk Assessment, which can help you learn risks for certain diseases and conditions to help you and your family make healthier lifestyle choices.

Another service that is becoming more common is 24-hour, 365 days a year access to providers through telehealth. Many health plans have an established telehealth provider network and as a member you can talk to an in-network provider from the comfort of your own home, whenever it's convenient for you.

An Employee Assistance Program is another type of service that many health plans offer. An EAP is free and confidential and partners with your employer and health plan. This type of program typically offers counseling, legal advice, financial resources and other services to address a wide range of personal concerns. It can help address life stress, save you time and generally improve quality of life for you and your family.

Don't miss out on the free services that your health plan has to offer that can help you improve your health and well-being.



Welcome to Medicare!

Who doesn't love getting something for free! Medicare Part B (medical insurance) covers a "Welcome to Medicare" preventive visit with your primary care provider once within the first 12 months you have Part B. If your provider accepts Medicare, your visit is free. Be sure to say you want a "Welcome to Medicare" preventive visit when you make your appointment. If you're seeing a new provider, bring the following with you to your appointment:

- A list of your current medications, including over-the-counter vitamins and supplements.
- Your medical records, including vaccinations.
- Your family health history.

Why this visit is important

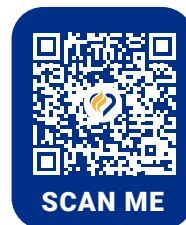
This is a chat between you and your health care provider and gets your Medicare journey off on the right foot. It includes preventive evaluations and discussions that can help keep your health on track, such as:

1. Medical and social history review.
2. Blood pressure check.
3. Height, weight and body mass index measurement.
4. Vision check.
5. Vaccination review.
6. Advance directives discussion.
7. Mental health screening for depression and a safety evaluation.
8. Personalized plan along with recommendations for health screenings, vaccinations and other preventive care you may need.

What this visit doesn't cover

Your provider can charge you a copay or deductible if you receive services outside the scope of this visit. If your provider recommends vaccinations or additional screenings be done during this visit, inquire about additional costs. Your provider knows what Medicare covers and if you will be charged.

For more information, visit [medicare.gov/coverage/welcome-to-medicare-preventive-visit](https://www.medicare.gov/coverage/welcome-to-medicare-preventive-visit).



Motorcyclist defies odds, regains adv

“Every time I feel pain in my ankle — even if slight — it means I’m alive and for that I am grateful,” said Kent Emry, 54, of Eugene.

“I was cruising down I-5 on my motorcycle, making my way home to celebrate my son’s birthday. I even had a backpack full of gifts,” said Emry.

It was June 12, 2018, and the day was extremely hot.

“I decided to remove my leathers, which I knew was against rider’s rules. With only a little more travel ahead of me, I remember thinking, what could go wrong?”

Moments later, the back wheel of Emry’s motorcycle locked up and it immediately skidded out from under him.

“I remember feeling my body tumbling on the pavement and seeing the road rapidly moving beneath the facemask of my helmet — I was conscious the entire time.”

Instinctively, Emry stood up when his body finally came to a stop. He quickly fell to the ground, and in that moment, he realized his left ankle was completely smashed.

Lying on the ground in pain, his body covered in wounds, all Emry could think about was his wife. The long-term implications of his injuries were an afterthought.

“I needed to be the one to let her know what happened and that I was OK, before hearing the news from a first responder.”

After his wounds were cared for, and surgery performed on his ankle, Emry’s surgeon told him he would never walk

again without a brace — that he needed to be prepared to live life differently.

“I wasn’t about to accept this as a final outcome,” said Emry. “My life is busy! I’m a father of seven kids, entrepreneur, adventurer with a passion for hiking, racing cars, flying planes and so much more — my mobility is everything.”

Emry heard about oxygen therapy as a healing option from his brother who works in the wound care field. Less than a week after the motorcycle crash, he began hyperbaric oxygen therapy at Samaritan Wound, Vein & Hyperbaric Medicine in Albany.

After 60 oxygen therapy treatments, and countless hours of other physical rehabilitation activities, Emry also attributes his recovery to maintaining a positive attitude, doing what his medical care team told him and to his wife for her compassion and diligent care throughout.

He’s back to doing what he loves — spending time with family, running his businesses and being active.



Building
perseverance
together

adventurous lifestyle

“My life may be adventurous, and oxygen therapy helped get me where I am today physically — but the fact that I am alive and able to continue on like I did before the accident is not lost on me,” said Emry, as he reflected on his daughter’s wedding day and being able to walk her down the aisle.

Even now, three years after the accident, Emry continues to challenge the physical strength of his ankle.

“I started training with a jiu-jitsu coach and surprised one of my sons when I actually knew what I was doing during our competition,” said Emry.

Emry has also rebuilt the motorcycle involved in the crash and enjoys riding again.

“I wasn’t about to let it win!”



**Learn more
about Kent Emry
and his ride back
to adventure at
samhealth.org/KentE.**

Hyperbaric oxygen therapy fosters wound healing

Most of the time, when you get a cut or scrape your body rushes to fight off infection and repair the damaged tissue. But for some people, the body struggles with the healing process and certain kinds of injuries or chronic, non-healing wounds become a problem.

Hyperbaric oxygen therapy provides pure oxygen to a patient in a pressurized chamber and can give the body a jump-start to promote healing.

How it works

On average, air contains about 21% oxygen, which is plenty for healthy blood oxygen levels. During oxygen therapy, 100% oxygen is provided. Within the pressured chamber the oxygen molecules shrink so that the lungs can bring in nearly 10 times more oxygen into the blood stream than they do normally. This oxygen influx improves the way the blood reaches and reacts with the damaged areas.

When hyperbaric oxygen therapy can help

During treatment, patients lie in a chamber and breathe in pure oxygen. Since the chamber is pressurized to an equivalent of 33 feet under seawater, they may feel their ears pop as they “dive.” Patients usually need to dive for two hours, five days a week for a total of 30 to 60 treatments.

Oxygen therapy can help tissue damage from prior radiation, wounds which haven’t healed within 30 days, non-healing diabetic foot ulcers, chronic bone infections, and, in the case of Kent Emry, severe injuries involving acute tissue damage.

Learn more about hyperbaric oxygen therapy at samhealth.org/HBOT.

New microneedling skin treatment now offered

As you age, there is a natural decline of collagen production, an essential protein that keeps skin looking firm, smooth and youthful. While you can't stop time from moving forward, there are treatments to help stimulate these age-defying proteins, such as microneedling.

Microneedling, now offered at the Samaritan Plastic, Reconstructive & Hand Surgery in Corvallis, is a treatment that helps induce collagen production using controlled mechanical stimulation. This minimally invasive procedure can treat a variety of skin concerns, helping to:

- Reduce the appearance of fine lines and wrinkles.
- Refine pores.
- Improve the look of sun damage.
- Reduce the appearance of acne scars.
- Improve the look of newer stretch marks.
- Smooth skin texture.
- Boost collagen and elastin.
- Increase absorption of skin care products.



Just one microneedling treatment will give your skin a glow and continue to boost new collagen for months thereafter. It is commonly performed to the entire face, however any area of the body can benefit, such as the neck, chest, arms, hands or abdomen.

There is little to no downtime following treatment, but for some, slight irritation and redness may result for the first few hours or up to a few days, as the skin repairs and starts regenerating new tissue. Benefits can be expected after the first treatment, with more significant improvements noticeable after a series of three to four treatments.

Microneedling is considered safe for most people. However, it is always good to schedule a consultation before starting any new procedure to make sure it is a good fit for your skin and lifestyle.

To learn more or to schedule a consultation, visit samhealth.org/Beauty or call 541-768-4370.



Innovative cancer software improves patient safety, treatment accuracy

Last fall, the Samaritan Cancer Program in Corvallis furthered its treatment advancements with the addition of the software system IDENTIFY. This is a motion management tool that helps improve patient safety, broaden treatment delivery options and enhance the accuracy of radiation therapy.

“IDENTIFY performs what is known as surface-guided radiotherapy, using cameras to track a patient’s skin surface with submillimeter accuracy in real time during treatment,” said Thomas Iverson, medical physicist in the Radiation Oncology department. “The system also provides other accuracies, such as verifying the patient, positioning their body on the treatment table correctly and aligning with the patient’s radiation therapy treatment plan.”

So, how does the software system distinguish from one patient to the next?

“It all starts with the palm of a patient’s hand,” said Iverson. “Upon check-in, the patient’s palm is scanned using the IDENTIFY system, which then launches the software used in the radiation treatment room.”

While most major cancer centers offer some form of surface tracking, the Samaritan Cancer Program is one of only a handful of locations in the U.S. to have incorporated this advanced software.

In addition to IDENTIFY, last spring, the Samaritan Cancer Program acquired a new linear accelerator called Varian Truebeam Edge, the first of its kind in Oregon.

To learn more about cancer services offered at Samaritan, visit samhealth.org/Cancer.



Bravery Center offers resources, support to rural LGBTQ+ youth

Growing up in a rural community can feel isolating.

For LGBTQ+ young people, those challenges can be compounded by a lack of awareness within the community, increased harassment and discrimination, family rejection and lack of support. There are also fewer opportunities to explore and develop their identity and connect with similar people.

Des Swisher, 18, of Lincoln City, remembers how it felt when all the posters for the Gender-Sexuality Alliance Club at Taft High School were torn off and stolen.

“Some were found ripped apart,” Swisher said. “From then on, all our posters were kept in classrooms under surveillance.”

Swisher, who graduated in 2021, recalled how club members would come to him distraught over incidents like this.

“Of course, the removal of posters was far less dehumanizing than some of the verbal bullying we experienced,” Swisher said.

Swisher is a member of the Bravery Center’s youth leadership team, where he’s learned to provide peer support and assistance. Bravery Center is based in Lincoln County and helps LGBTQ+ youth survive and thrive in a rural community. It’s part of the Olalla Center, a nonprofit organization that provides family mental health services.

Bravery Center was created in 2020 as a pilot project with InterCommunity Health Network Coordinated Care

Organization. Providing affirming behavioral health services is one of the health outcomes the program has achieved, despite the disruption caused by COVID-19, which has resulted in most of the service delivery moving to a virtual platform.

Through Bravery Center, LGBTQ+ youth across Lincoln County have felt connected.

“Strength comes in numbers and shared experiences,” Swisher said. “At Bravery, we have access to a loving community and resources.”

The center is also fostering future leaders. With support from Beck Fox (they/them), Bravery Center’s director, Swisher and other youth from the leadership team successfully petitioned the Lincoln County commissioners to declare June 2021 as Pride Month.

Fox was impressed by the success of their advocacy.

“We’re empowering youth and helping them to develop the skills to be resilient and find their voices in the face of adversity,” Fox said. “They are a tremendous inspiration to me.”

To learn more, visit olallacenter.org/bravery-center.

Above: Bravery Center youth leader Des Swisher (left) and director Beck Fox (right) are helping rural LGBTQ+ youth to thrive in Lincoln County.

Medical respite bed leads to permanent housing for Lebanon transplant survivor

Things couldn't get much worse for John Pearson, 57, of Lebanon.

He was living in the dirty basement of an old home with one bathroom for seven people.

"I've been in terrible conditions, but nothing like this," Pearson recalled.

Pearson is a double-lung transplant survivor, and his immune system is weak and susceptible. There was black mold on the walls, and he was hungry.

It was only a matter of time before he succumbed to illness.

"I had to call the ambulance," Pearson said. "They took me to Samaritan Lebanon Community Hospital."

When he returned home, the person he had been staying with notified him that he needed to leave.

"You've got to go by April 9," she said.

It was April 6, 2020.

Then Pearson remembered a message he had received from social worker Anita Earl with Samaritan's Care Hub. A nurse at the hospital contacted the Population Health Services department that provides outreach to unhoused patients in Benton, Lincoln and Linn counties.

Out of options, Pearson returned the call.

That's when things started to get better.

Samaritan partners with community organizations including Second CHANCE Shelter, Albany Helping Hands, Corvallis Housing First, NW Coastal Housing and Community Outreach, Inc., to offer medical respite beds.

Earl was concerned that Pearson was most vulnerable to COVID-19, so she found him a respite bed in a transitional housing complex in Corvallis. Although temporary, it was a step forward in regaining his health.

"If you haven't had a double-lung transplant, you don't understand germs and being clean," he said.

In 2010, Pearson was working as a mechanic when he experienced shortness of breath. At the hospital, a blood test confirmed that he had a rare genetic disorder, alpha-1 antitrypsin deficiency, which can cause lung disease. By 2017, it had progressed to the point where he relied on supplemental oxygen. He was on the transplant list, but he wasn't optimistic.

"I went from bad to worse," he said. "I thought it was all over."

Then he got a call from the transplant team.

Since receiving new lungs, Pearson depends on medication to stay healthy. After he moved to his respite bed, staff shopped for him so that he didn't risk exposure to COVID-19. And when wildfire smoke seeped through the cracks in the windows, they covered them with towels and made a late-night trip for supplies to insulate his room.

Meanwhile, Earl searched for permanent housing for Pearson. A new HUD apartment complex was opening in Lebanon, and she encouraged Pearson to apply.

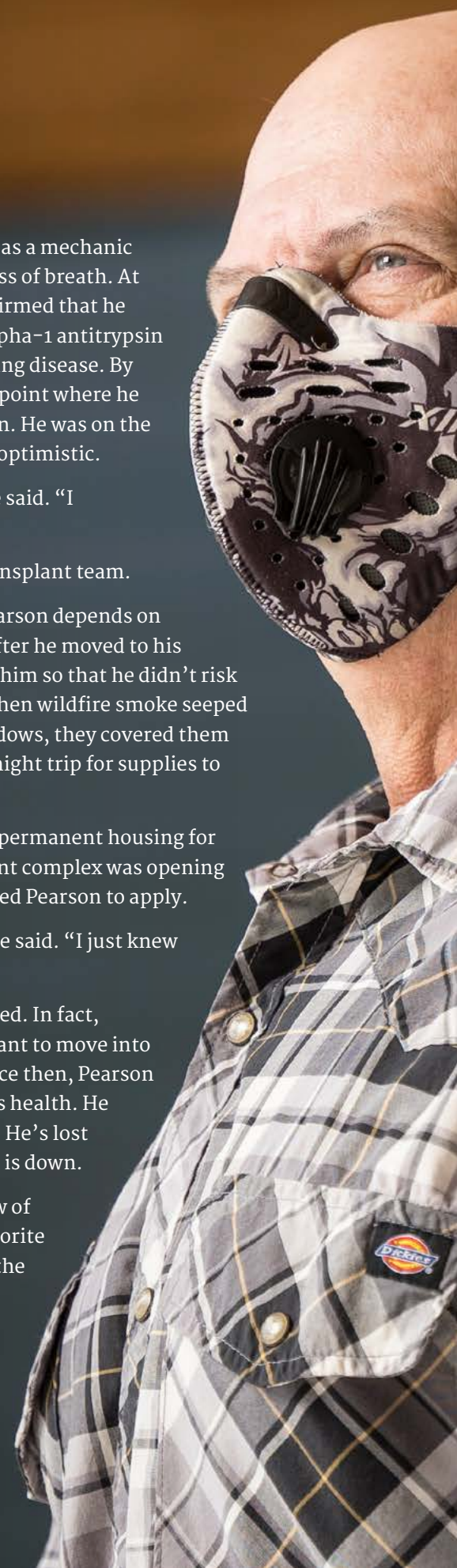
"My background is terrible," he said. "I just knew I was not going to get in."

But he applied and was accepted. In fact, Pearson was the very first tenant to move into Garden View Apartments. Since then, Pearson has taken steps to improve his health. He walks at least five miles a day. He's lost 35 pounds and his cholesterol is down.

The brand-new unit has a view of the hills. Mornings are his favorite time of day when he watches the sunrise out his window.

"I get tears thinking about what a blessing it is," he said.

"It's my home."





Connecting patients with community resources to improve quality of life

Staying healthy takes more than having access to quality health care and regular checkups.

The places where we live, learn, work and play also affect health outcomes, as well as the quality of our lives. These conditions are known as the social determinants of health.

Samaritan is helping its patients and health plan members address the social determinants of health in many new ways.

Samaritan's Population Health Service has a Care Hub department that partners with community-based organizations to provide outreach to patients who are experiencing homelessness. Patients who are unhoused can be offered food, clothing, camping supplies and other support as needed in a backpack to-go. These items are being distributed by the Care Hub team in Samaritan emergency departments and clinics.

And Care Hub nurses and social workers are dispatched into the community to increase access to medication and health services, including the Corvallis Daytime Drop-in Center and Third Street Commons in Corvallis.

In addition, Samaritan Medical Group's primary care clinics are introducing a pilot program where community health workers will assist patients by facilitating referrals to community resources. Patients will have the option of completing a simple form that asks how the social determinants are impacting their life, health and well-being. The information is part of a patient's health record that care team members can review for follow-up. In some circumstances, a community health worker can even meet with a patient while they are at an appointment to address concerns.

Samaritan utilizes a software program, Unite Us, which links medical providers with more than a dozen community organizations that provide services, including assistance with dental, education, food, housing, mental health, substance use and transportation.

Kristy Jessop, MD, medical director of Population Health at Samaritan, said that based on what is learned in the pilot, she would like to implement screenings for the social determinants of health in all 22 primary care clinics and add community health workers to care teams.

"We'd like reach out to people before they show up in our clinics, emergency rooms and urgent care," Dr. Jessop said. "We want to be proactive in addressing their needs."



Backpacks given to patients are supported by donations to the Care Hub fund through the Samaritan Foundations. To make a donation, visit samhealth.org/GiveGSHF.

John Pearson's health has improved significantly since he moved to his new apartment in Lebanon.

Samaritan welcomes new



Jay Anderson, DO, has joined Samaritan Lincoln City Medical Center. He earned a bachelor's degree from Portland State University and a medical degree from Western University of Health Sciences College of Osteopathic Medicine of the Pacific-Northwest. He completed residency training at University of Oklahoma School of Community Medicine. He can be reached at **541-994-9191**.



Constance "Connie" Barthel, PA-C, has joined Samaritan Depoe Bay Clinic. She earned a bachelor's degree at University of Washington, completed the MEDEX Northwest Physician Assistant Training Program and a master's in physician assistant studies from University of Nebraska Medical Center. She can be reached at **541-765-3265**.



Stacy Braff, MD, has joined Samaritan Internal Medicine – Corvallis. She earned a bachelor's degree at SUNY at Stony Brook and a medical degree at Albert Einstein College of Medicine. She completed residency training at Beth Israel Medical Center. She can be reached at **541-768-5140**.



Alyssa Caminata, NP, has joined Samaritan Evergreen Hospice. She earned a bachelor's degree in nursing at Grand Valley State University Kirkoff-College of Nursing and a master's of science in nursing at Walden University. She can be reached at **541-812-4662**.



Megan Gause, DO, has joined Samaritan Medical Group Geriatric Medicine. She earned a bachelor's degree at University of Oklahoma and a medical degree at Edward Via College of Osteopathic Medicine - Carolinas. She completed residency training at Fort Collins Family Practice Residency Program and a fellowship in geriatrics at University of Colorado. She can be reached at **541-451-6413**.



Melanie Jackson, MD, has joined Samaritan Endocrinology. She earned a bachelor's degree at Oregon State University and completed a graduate degree, a medical degree and fellowship at Oregon Health & Science University. She completed residency training at University of Washington-Boise. She can be reached at **541-768-7900**.



Taylor Johnson, DO, has joined Samaritan Family Medicine – Southwest. He earned a bachelor's degree at University of Oregon and a medical degree at Lake Erie College of Osteopathic Medicine. He completed residency at Good Samaritan Regional Medical Center. He can be reached at **541-768-7300**.



Adam Knutson, DO, has joined Samaritan Medical Clinics – North Albany. He earned a bachelor's degree from Oregon State University and a medical degree at Pacific Northwest University of Health Sciences. He completed residency training at Good Samaritan Regional Medical Center. He can be reached at **541-812-5700**.



Camilia Makhoun, DO, has joined Samaritan Kidney Specialists – Corvallis. She earned a bachelor's degree at Appalachian State University and a medical degree at West Virginia School of Osteopathic Medicine. She completed residency training at Carolinas HealthCare System Blue Ridge and a fellowship at Medical University of South Carolina. She can be reached at **541-768-6930**.



Christopher McCrum, MD, has joined Samaritan Athletic Medicine Center. He specializes in orthopedic surgery of the shoulder, knee and hip, as well as sports medicine. He earned a bachelor's degree at University of Michigan, and a medical degree at Case Western Reserve University School of Medicine. He completed residency training at Los Angeles County-USC Medical Center and a fellowship at University of Pittsburgh Medical Center. He can be reached at **541-768-7700**.

ew health care providers



Cay Mierisch, MD, has joined Samaritan Medical Group Hand to Shoulder Orthopedics – Corvallis. He specializes in shoulder, elbow, hand and wrist surgery. He earned a medical degree from Medical University of Lubeck, completed a master's degree, residency training, an internship and a fellowship at University of Virginia, and a fellowship in orthopedic surgery at Mayo Clinic. He can be reached at **541-768-6300**.



Jill Provaznik, MD, has joined Samaritan Infectious Disease – Corvallis. She earned a bachelor's degree at University of Arkansas and a medical degree from University of Arkansas College of Medicine. She completed residency training at Providence St. Vincent Medical Center and a fellowship in infectious diseases at University of Utah School of Medicine. She can be reached at **541-768-5810**.



Clara Stone, PA-C, has joined Samaritan Medical Group Breast Center – Corvallis. She earned a bachelor's degree at Messiah College and a master's degree at Oregon State University. She earned a master's in physician assistant studies from Arcadia University. She can be reached at **541-768-1252**.



Jeffrey Storrs, DO, has joined Samaritan Depoe Bay Clinic. He earned a bachelor's degree at Seattle Pacific University and a medical degree at Touro College of Osteopathic Medicine. He completed residency training at Fairfield Medical Center. He can be reached at **541-765-3265**.



Leah Swift, DO, has joined Samaritan Depoe Bay Clinic. She earned a bachelor's degree from Rice University and a medical degree from Edward Via College of Osteopathic Medicine. She completed residency training at Wake Forest University. She can be reached at **541-765-3265**.



Michael Swift, DO, FACOOG, has joined Samaritan Women's Health – Newport. He earned a bachelor's and graduate degrees from Virginia Tech. He earned a medical degree from Edward Via College of Osteopathic Medicine and completed residency training at Womack Army Medical Center. He can be reached at **541-574-7235**.



Sharon Thwing, LCSW, has joined Samaritan Mental Health - Circle Blvd. She earned a bachelor's degree at University of Arizona and a master's in social work at Arizona State University. She can be reached at **541-768-1221**.



Barbara "Barb" Torres, CNM, has joined Samaritan Obstetrics & Gynecology – Corvallis. She earned a bachelor's degree from California State University, Sacramento, and a master's degree from Case Western Reserve University and a master's degree in nurse midwifery from Frontier Nursing University. She can be reached at **541-768-5300**.



Elizabeth "Liz" Varley, DNP, has joined Samaritan Lebanon Health Center. She earned a bachelor's and master's degrees in nursing from Oregon Health & Science University, as well as a doctorate degree in nursing practice. She can be reached at **541-451-7992**.



Benjamin Walsh, PA-C, has joined Samaritan Cardiovascular Surgery. He earned a bachelor's degree from American Public University and a master's in physician assistant studies from Oregon Health & Science University. He can be reached at **541-768-5223**.



Emily Webber, PA-C, has joined Samaritan Medical Group Orthopedics – Corvallis. She earned a bachelor's degree from University of California at Davis and a master's in physician assistant studies from University of the Pacific. She can be reached at **541-768-4810**.

Need help finding a health care provider? Visit samhealth.org/FindADoc or call 800-863-5241.

Stronger Together:

Foundation campaign advances individual, community health

The health of the community relies on the health of the people who live here. Samaritan Health Services is committed to serving all those needing care, regardless of their age, gender, racial or ethnic group, ability or housing status. Some in the community, however, face challenges in accessing medical care and in achieving optimum health.

In response to community needs, and incorporating feedback and suggestions from many community partners and donors, Samaritan's charitable foundations are launching a systemwide comprehensive campaign, Stronger Together, featuring local and regional initiatives to improve access, build community, inspire hope and leave a legacy of generosity.

The Stronger Together campaign includes initiatives and projects that will make an immediate and long-lasting impact on the health of individuals at all stages of life.

The campaign consists of priorities from across Samaritan's three-county region and is designed to invite local support, enhance service offerings and strengthen community partnerships.

The five local Samaritan foundations, located in Albany, Corvallis, Lebanon, Lincoln City and Newport, have set a shared goal to raise \$35 million by 2025 in support of projects throughout the region such as the expansion of

urgent care services, investment in the very best cancer care and technology, and an innovative model of care and service coordination for patients with complex health needs through Samaritan's Care Hub.

The campaign also seeks to address the unique health needs of our communities and the region. Where we are born, live, learn, work and age can affect a wide range of health outcomes. Supporting these projects is critically important as we work together to improve the health of our region, reduce longstanding disparities in health and health care, and achieve positive health outcomes.

"Working together — with donors and communities in support of our local hospitals — is where we find our strength," said Doug Boysen, president/CEO of Samaritan Health Services. "We are committed to engaging and nurturing partnerships with local supporters to build healthier communities together, both within and beyond our hospital walls. As an organization, we are dedicated to serving our communities as an inclusive, respectful, equitable and responsive health care system."

Learn more about Stronger Together and make a donation online at samhealth.org/Giving.



Resources to keep you healthy



Classes and support

Samaritan Health Services offer a wide variety of support groups and health education classes and seminars to help community members find the support and knowledge they need to live a healthier life.

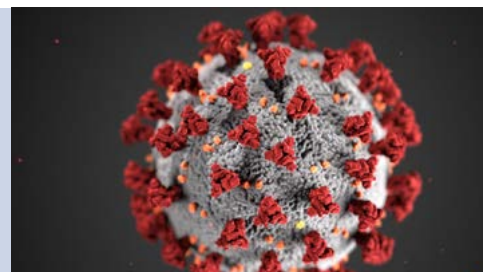
Health and wellness topics include: cancer, diabetes, heart health, childbirth, parenting, grief, living well with chronic conditions and more.

To see the most current list of events, visit samhealth.org/Classes.



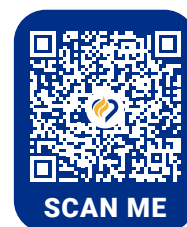
COVID-19 updates

Find the latest information on COVID-19 including visitor restrictions, testing procedures, vaccinations, boosters and more at samhealth.org/Coronavirus.



Keeping you informed

Sign up for Samaritan's e-newsletters by visiting samhealth.org/Subscribe.



To Your Health

Get monthly health and wellness tips and updates on classes and events.



Healthy Minds, Healthy Bodies seminars

Receive information on free health education seminars offered by Samaritan.



Samaritan Plastic, Reconstructive & Hand Surgery specials

Get beauty tips and learn about our cosmetic specials and events.

A close-up photograph of a woman with dark hair, smiling warmly as she pets an orange tabby cat. The cat is lying down, looking towards the camera. The background is softly blurred, showing the woman's face and hands. The overall mood is warm and affectionate.

Building
healthier
communities
together

How are pets helping people
through the pandemic?
Read more on page 15.



Samaritan
Health Services