

Spring/Summer 2023

heart *to* heart

Your local guide to good health
from Samaritan Health Services



**Choosing life over
fear, surviving cancer**



From the president

Doug Boysen, JD, MHA
President/Chief Executive Officer

Samaritan Health Services is proud to be celebrating the diamond anniversary of our flagship hospital in Corvallis. For 75 years, Good Samaritan Regional Medical Center has served the health needs of our community.

The nonprofit hospital was founded in 1948 when community leaders T.J. Starker and Rev. Charles Neville rescued the bankrupt for-profit Corvallis General Hospital. With the aid of the Episcopal Diocese of Oregon, a new era began with the creation of a hospital that was open to everyone.

Community collaboration

The for-profit hospital had been around since 1922, so part of the process of Good Samaritan's evolution to become a nonprofit facility included convincing all 125 share holders to donate or sell their hospital shares. The local Lions Club was instrumental in supporting a drive to collect the donated shares.

Starker and Neville also worked with legislators at the state capitol and with the Oregon Hospital Association to finalize details of the transfer. Learn more about Good Sam's rich history in a related article on page 2.

Bright future

That legacy of care continues today at Good Samaritan Regional Medical Center. The outstanding care provided here benefits not only those in Corvallis, but community members from across the region. Access to specialty care and a Level II trauma center means our patients receive the life-enhancing care they need, much closer to home.

As we plan for growth in the next 75 years, we also have an eye on sustainability. Our stewardship of the hospital and health system will ensure that generations to come will have access to high-quality care.

Join us this year in celebrating the milestone anniversary. You can support Good Samaritan Regional Medical Center or your local Samaritan hospital in several ways. Consider donating your time or talent as a volunteer or a member of our patient and family advisory councils. Also, please consider donating funds to your local Samaritan foundation. We welcome your collaboration as we build healthier communities together.

To your health,

heart to heart

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Share your thoughts

Please send your questions and comments to feedback@samhealth.org or to:

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On the cover: Breast cancer survivor Maria Diaz found the courage to face her fears. Learn more about her journey to choose life-saving treatments on page 8.

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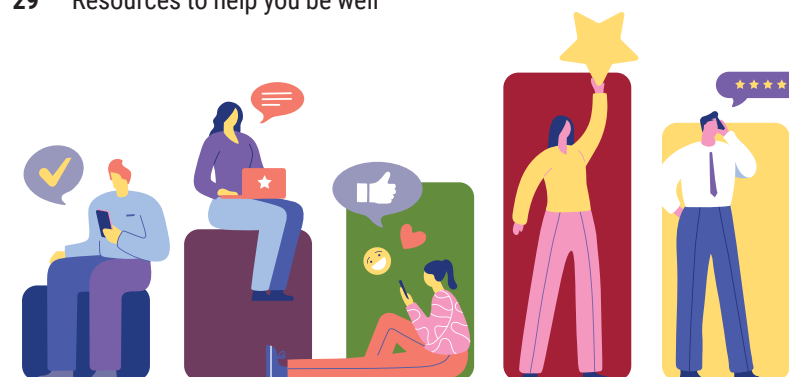
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Good Samaritan celebrates 75 years of collaboration and community

Good Samaritan Hospital's birth is traced back to 1948. The actual day can be debated. For instance, on June 30 of that year, Corvallis General Hospital deeded the mortgage to Good Samaritan Hospital. There was a signing ceremony on the hospital front steps on July 20 and on Aug. 5 the deed was officially recorded with Benton County.

What we do know is community leaders, including T.J. Starker and Rev. Charles Neville, rescued a bankrupt for-profit Corvallis General Hospital with the aid of the Episcopal Diocese of Oregon and planted the cornerstone of Samaritan's legacy by creating the nonprofit hospital that was open to everyone.

The hospital, at this time, was located on NW Harrison Boulevard and 27th Street. The building was described in historical articles as "run down, having a poor design and inadequate equipment," reflecting the wake of decades of capital neglect and fiscal mismanagement.

One of the design flaws, which was relayed in an article by Jean Starker Roth, was the Emergency Room — accessible only by a steep wooden staircase. Starker Roth recalled watching her husband Kermit carried up those stairs after a vehicle accident.

"It was quite a traumatic experience," she said.

The for-profit hospital had been around since 1922. Part of the process of Good Samaritan's birth into nonprofit status included convincing all 125 bond holders to either donate or sell their hospital shares. The local Lions Club began a drive to collect the donated bonds, however an opposing faction attempted to buy these outstanding bonds. In the end, one outstanding bond remained and a committee was formed to raise \$22,000 to purchase the lone holdout.

Grounded by a mission and purpose to serve

The next step was an audience with legislators at the state capitol where Starker and Neville took care of legal matters associated with the transfer. After meeting with the Oregon Hospital Association, the duo declared no patient who needed hospital care at Good Samaritan Hospital in Corvallis would be turned away.

Within two years the nonprofit hospital chose their head nurse, Virginia Welch, to lead them as Good Samaritan Hospital's first administrator. A community-wide fundraising campaign was launched to bring the derelict building up to standards of the day.

That year also marked the hospital's first expansion. This included a new wing of surgical, medical and pediatric beds, office space and a new lobby.

By 1953 the hospital had 88 beds and a medical staff of 25. However, within a year and with the post-war population booming, a bed shortage forced staff to find other areas to board patients including in the hallways. Community fundraising efforts to obtain matching funds for a federal grant paved the way for the first of a series of additions to the hospital.

Further expansions

In total seven fundraising drives brought in matching monies and additions including 1958's 2-west wing. This included a new central supply room, recovery room, an additional laboratory with pharmacy space, an air-conditioned surgery facility, 27 additional beds, a new elevator and remodeled obstetrics unit.

In the early 1960s, the hospital grew again with the construction of 3-west. This wing included an intensive care unit and 30 additional patient beds, making the total capacity 131. The next was the two-story east wing which added 56 extended care beds.

When Welch arrived in Corvallis the hospital had 40 beds and 12 physicians. When retired in 1967, she left a hospital with 181 beds and 60 physicians.

Although new administrator James R. Mol took over a debt-free nonprofit hospital, the aging physical building was a money pit.

Outside the hospital, a population of post-war "baby boomers" coming to Oregon State University created severe housing and parking issues.

A blessing reaps greener pastures

Once again, it was Rev. Neville coming to Good Samaritan's rescue. As the story goes Rev. Neville, after blessing the new Corvallis Elks Lodge (now The Corvallis Clinic's Aumann Building) took note of the remaining acreage of the Oliver Sharples grass seed farm to the north. He knew he had found the site for the new hospital.

Site excavation began in 1972 and on Dec. 7, 1975, with the help of the National Guard, 78 patients were moved into the facility. Gone were the long hallways with nurses stations on one end. In their place were pods with nurses stations at the center.

By the time Mol retired in 1987, the hospital had added 22 short-stay hospital beds, a radiation therapy program for cancer patients and greatly expanded outpatient services including lab and X-ray.

The hospital continued to grow, meeting the needs of the community.

New construction included a medical office building named after Rev. Charles S. Neville, a regional cancer center, cardiac surgery program, mental health center, hospitality house and classification of a Level 2 trauma center.

Health care today

In 2020, newly hired CEO Laura Hennem led Good Samaritan in facing its toughest foe — COVID-19.

Currently the hospital is licensed for 188 beds including an ICU of 20. The staff includes more than 900 nurses, 533 physicians and advanced practice providers who have privileges to see patients or perform procedures at Good Sam.

"Looking back over the past 75 years of Good Samaritan, it's clear that there is always been a commitment to ongoing evolution, improvements and enhancements to meet the

needs of our community," Hennem said. "Looking forward, we plan to retain that connection and commitment. As part of that, we've just started in earnest on a new three-year strategic plan, and much of it focuses on key service areas to support our community."

Three key areas of focus for Good Samaritan will be mental health, women and families, and heart and vascular care.

In a recent survey of the greater Corvallis community, business leaders and the Good Samaritan neighborhood indicated priority should be given to mental health.

Positioning for the future

This year remodeling is in the works at hospital's inpatient mental health unit which will double its current size. Another part of Samaritan's commitment to mental health is appointing Senior Medical Director Robert Fallows, PsyD.

"Putting Dr. Fallows in that position is another commitment to looking ahead and recognizing how we'll need to evolve and change to meet the growing mental health needs of our community," said Hennem.

Good Samaritan Hospital Foundation is also continuing the legacy it started nearly 75 years ago. This year's investment will remodel and upgrade the current Center for Women & Families.

"I am very proud of the fact that our foundation is supporting work for that important refresh," Hennem said.

In the area of heart and vascular care, Samaritan recently added the first board-certified vascular surgeon Aditi Madabhushi, MD. The hospital also hosts two cardiothoracic surgeons through an affiliation with Stanford Health Care.

"Today, it is even more important to serve our community by carrying on the tradition of a comprehensive hospital open to everyone," said Hennem. "That's what makes Good Samaritan so special."



A look at hospital care, *then and now*

Over the past 75 years, health care has experienced numerous changes from technology to staffing. Explore the various ways the industry has changed with these fun comparisons.

Physicians



Then: In 1950, there were 18 physicians working at Good Samaritan Hospital with Alice M. Bahrs, MD, being the sole female doctor on staff.



Now: There are 533 physicians and advanced practice providers who have medical staff privileges at Good Sam. There are another 139 who have primary privileges at another Samaritan hospital, but also have privileges at Good Sam. Of these 672 clinicians, 302 are women.

Nursing uniforms



Then: The early version of a nurse's uniform combined functionality and femininity. Longer hemlines and sleeves were designed to protect nurses from infection, while the white caps conveyed the prestige of the profession.



Now: Nurses wear scrubs that are sometimes color coded for the unit they are working on. Short-sleeved scrub tops are encouraged because dangling sleeves can come into contact with fluids or spread germs in patient care environments.

Recordkeeping



Then: Nurses would record patient charts with colored pens based on shifts. A large storage room was filled from floor to ceiling with patient files and paperwork.



Now: Records are kept digitally. Patients using MyChart can often view their test results at the same time a doctor is viewing them.

Ventilators

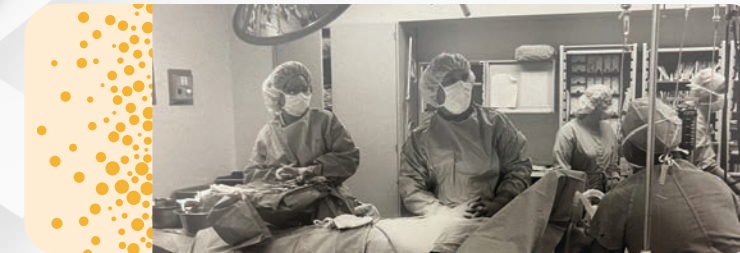


Then: The iron lung, a negative pressure ventilator, was invented in 1927 to enable patients with polio to breathe on their own. In 1958 the Good Samaritan Hospital Foundation purchased the hospital's first iron lung. Most patients spent a few weeks or months in the iron lung to reverse the paralysis of chest muscles associated with polio. At the height of the polio outbreaks, rows of iron lungs filled hospital wards.



Now: Iron lungs have been replaced with ventilators with primary uses as stand-alone units in the ICU and in conjunction with anesthesia machines in the operating rooms. These modern mechanical ventilators – positive pressure ventilation systems – work by blowing air into a patient's airways and lungs using a breathing tube.

Operating rooms

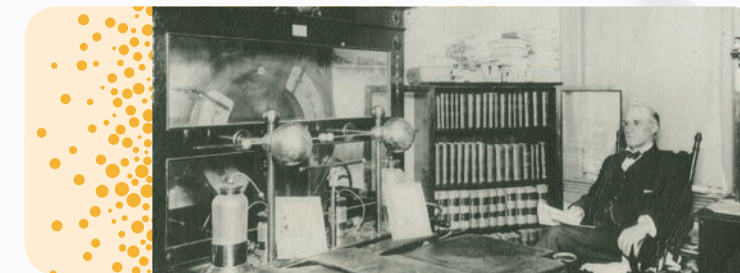


Then: Operating rooms and hospital layouts were set up to accommodate every surgery taking place on a particular day. All of the tools the doctor would need for the day were pre-arranged, surgeries were largely experimental and doctors often worked alone.



Now: Each surgery and all of the necessary equipment to perform it are prepared beforehand to ensure everything is kept sterile. Doctors also work in teams and shifts to increase expertise and reduce error.

Imaging



Then: The first X-ray arrived in Corvallis less than 20 years after it was invented by German professor of physics, Wilhelm Rontgen. In 1912 local doctor B.A. Cathey set up the first X-ray machine at his practice in Corvallis. The concept is based on the principle of passing ionizing radiation through the body and having the images projected on a photosensitive plate placed behind it. For years, the X-ray was the primary method used to detect medical problems.



Now: Imaging has expanded to other forms such as CT scan, MRI and digital X-ray giving clinicians a nearly real-time view of a patient. There is more accuracy in diagnosing a medical problem and, because of these advances, there is also less need to perform exploratory surgery.

Nurse's career spans two facilities, many developments in health care



Charge Nurse Cindy Roler (left) is the longest serving employee at Good Samaritan. She poses with one of the hospital's newest Emergency Department nurses, Taylor Bielenberg.

Cindy Roler, RN, remembers the long hallways of Good Samaritan Hospital. She started working there as a nurse more than 47 years ago, making her Good Sam's longest-tenured employee.

"There was a tiny ICU of six beds that went out onto another unrelated unit," said Roler. "I worked nights when I first came to the hospital. You started on night shift and worked your way up to days."

Roler's first night shifts were on a unit that combined both medical, surgical and psychiatric patients.

"That did not always go well," Roler said.

From there she transferred to orthopedics.

"That was a very long hall, we had two nurses, an aid and an LPN for 30 patients," said Roler. "That was a time when people actually stayed in the hospital. If you had knee surgery, you were there for five to seven days. If you had a total procedure on a hip, you were there for two weeks."

Nursing practices were also different than today. Staff teamed up to turn over orthopedic patients and medicine was dispensed orally or through an intramuscular injection, since IV medicine was still years in the future.

As 1975 approached, talk of moving to a new hospital became reality. The move occurred over Roler's vacation.

"It was just amazing," said Roler. "On the smaller units, you could see everyone and you've got a nurse's station and a break room. At the beginning we thought 'We'll never use all these rooms.'"

Once settled in, Roler transferred to the surgical floor. After maternity leave, she returned part time as a float night nurse and then as a relief supervisor on night shift. Finally, Roler transferred to the Emergency Department on the night shift.

Night shift in the 10-bed Emergency Department was staffed with two nurses.

"We did all our ordering on paper," said Roler. "We had to wait for their family doctor to admit a patient, since we had no hospitalist."

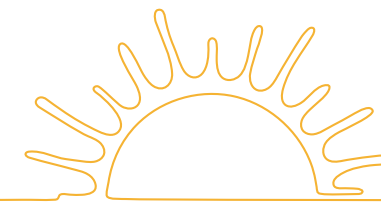
Roler credits the advent of hospitalists as a great advancement in both flow and efficiency.

"Throughout my career I have been blessed to work with really solid people that make a really good team," said Roler.

One of the benefits of longevity in Benton County is that Roler will occasionally take care of someone she knows.

"They may not necessarily know my qualities as a nurse," said Roler "But they just know me as a person, it's a comfort to people. They are in a strange place in a stressful time. It is their emergency. I've had many people say, 'Oh, I'm so glad you're here.'"

Care for the skin you are in



Having a "tan" has long been glamorized. However, a tan is actually a sign of skin damage. The skin acts out of self-defense and releases melanin, a pigment that darkens the skin. With a lifetime of repeated exposure, including sunburns, this damage can lead to premature aging and possibly skin cancer. Approximately one third of adults get sunburns at least once a year and more than one-half of high school-aged students get serious burns.

There are two types of ultraviolet radiation that penetrate the skin:

- UV-B rays enter the top layers of skin and are most responsible for sunburns.
- UV-A rays penetrate the deeper layers of the skin and are often associated with allergic reactions, such as a rash.

Tanning salons use lamps that emit both UV-A and UV-B radiation — rays that can damage the skin and lead to skin cancer. Oregon and Washington are the only states that prohibit minors (under age 18) from using indoor tanning devices unless prescribed by a doctor.

You can take steps to protect yourself from damaging UV radiation that causes skin cancer.

- Do not burn.
- Cover up when outdoors.
- Seek shade or use an umbrella.
- Generously apply sunscreen.
- Use extra caution near sun-reflecting water, snow and sand.
- Avoid sun tanning and tanning beds.

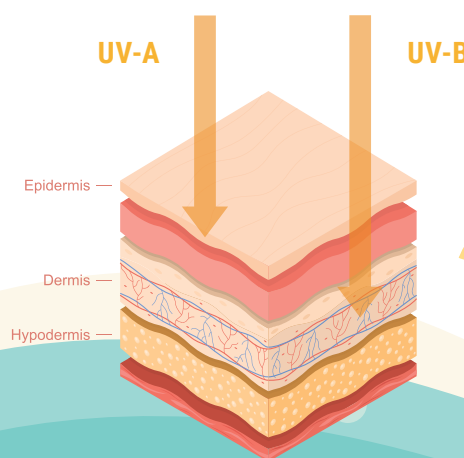
According to the National Cancer Institute, exposure to UV radiation which results in a tan, whether from the sun or from tanning beds and sunlamps, increases the risk of developing skin cancer.

There are different types of skin cancer. Melanoma is the deadliest since it is more likely to invade surrounding tissue and spread to other areas of the body. However, melanoma is less common than other types of skin cancer, such as squamous cell carcinoma and basal cell carcinoma.

Did you know it's a myth that only people with light or fair skin tones are at greater risk? Although dark skin doesn't sunburn as easily as fair skin, everyone is susceptible to skin cancer.

Enjoying the outdoors is still recommended, according to Herschel Wallen, MD, a medical oncologist with Samaritan Hematology & Oncology Consultants.

"I encourage my patients to use a mineral-based sunscreen (such as zinc) with a minimum SPF (sun protection factor) of 15; wear loose fitting; long sleeves, pants or sun-protective clothing; a wide-brim hat and sunglasses," said Dr. Wallen "The best way to be safe, have fun and prevent skin cancer is to protect your skin."



Choosing life over fear, surviving cancer

“You have to choose life. To make the decision to fight and never give up,” said Maria Diaz, 64, of Corvallis, when asked what advice she has for others facing a cancer diagnosis.

In early 2020, Diaz began her normal daily routine. Wake up, get ready, head to work. On this day though, while applying deodorant, Diaz felt a hard lump in her left armpit. Not experiencing any pain or sickness, she continued as usual.

Some time had passed, and still not experiencing pain or sickness, but after continued persistence from her husband, Genaro Martinez, Diaz went to see her family doctor.

“My doctor believed right away it was cancer,” said Diaz. “To be sure, I was referred to Samaritan to get a biopsy.”

Days later at a follow-up appointment, Diaz received the news. The biopsy confirmed she had locally advanced breast cancer, stage IIIB. Specifically, triple positive invasive ductal carcinoma. Triple positive breast cancer is a condition which tumor cells have positive estrogen receptors, progesterone receptors and abnormal HER2 receptors.

“I felt sick. I didn’t want anyone to see me,” said Diaz. “I went straight to my room and cried.”

It was in that moment though, Diaz knew she had to fight, to overcome this cancer. She decided to stop working and focus solely on her health.

Hay que elegir la vida, a pesar del miedo. Esa es la perspectiva que tenía María Díaz, de 64 años, de Corvallis después de recibir la noticia de su diagnóstico de cáncer de mama. Sometida a toda gama de tratamientos, desde seis rondas de quimioterapia hasta una lumpectomía del seno izquierdo, seguida de seis semanas de radioterapia, la señora Díaz está agradecida por su familia, el equipo de atención del cáncer y la nueva vida que se le ha dado. Escuche más de la señora Díaz, su perspectiva de la vida y su viaje como sobreviviente de cáncer en samhealth.org/MDiaz.

Accompanied by her husband and one of her sons, Miguel Martinez, Diaz began the first of six rounds of chemotherapy in early 2021.

“Chemotherapy was tough,” said Diaz. “My appetite was gone and I’m a good eater. I lost my hair and in an ugly way. I just felt bad.”

Very little sounded good to eat while receiving chemotherapy. Finally, her daughter-in-law, Yesi Martinez, discovered that freshly made tortillas and menudo, a traditional Mexican soup and family favorite, settled well.

“When the menudo was presented to me, I was sure I would get sick like I did with everything else. But I was able to enjoy several helpings, and the best part, keep it down,” Diaz said.

Finding a food that settled her stomach during chemo was a big win. But her family wanted to do more. They wanted to help bring a sense of normalcy to their loved one during this difficult time.

“My family took me in for a wig fitting. It wasn’t for me though. I just didn’t feel like myself,” Diaz said. “One of my sons then found these lovely hats. They came in many different colors. Oh, how I loved these hats, and I even received many compliments from my care team!”

Chemotherapy was but only one step in Diaz’s treatment plan. Surgery was next.

“This was even more terrifying,” Diaz said. “I knew my surgery date was approaching, but I didn’t want to discuss it — not with family — not with my care team either. I was afraid that I would be put to sleep and not ever wake up.”

Needing to find calmness within her storm of emotions, Diaz would go on walks.

“Sometimes I would go out late at night — my husband keeping a watchful eye to ensure I stayed safe. Other times, I would venture out during the day between appointments,” said Diaz. “This helped slow my racing mind and ease my nerves and fear.”

After the left breast lumpectomy and removal of a large section of lymph nodes underneath the arm, Diaz started the third phase of her treatment plan, radiation therapy, a total of 28 rounds.

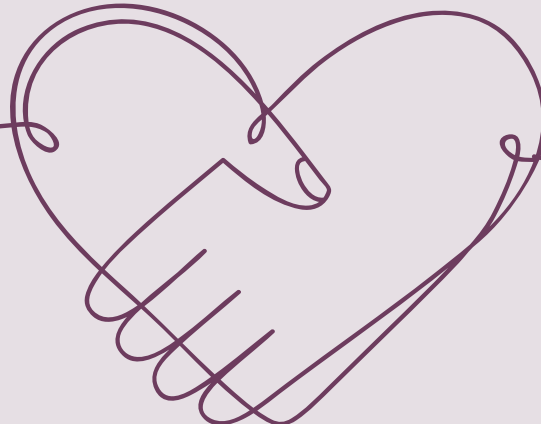
Now, as a cancer survivor, Diaz, expresses her gratitude for family, the cancer care team and life.

“Getting cancer brought my family closer than ever. I felt so much love and support at every step. And, I cannot say enough about my care team — the doctors, nurses, assistants — they were all so kind,” Diaz said. “Cancer changed me too. It is as though I was born again, that God gave me another life to live. As I see it now, life is too beautiful to waste it.”

Looking to the future Diaz has plans to return to Mexico to see more of her family, and to take the European trip she and her husband have always talked about.

Learn more about Maria Diaz, her outlook on life and her journey as a cancer survivor at samhealth.org/MariaD.

Building
courage
together



Community members invited to unite on National Cancer Survivors Day

Laughter and conversation amongst friends are the joyful sounds remembered by the cancer care team at Samaritan during the 2019 National Cancer Survivors Day event. This was the last in-person survivors day celebration prior to the COVID-19 global pandemic putting a pause on such activities.

Now, three years later, the Samaritan Cancer Program is thrilled to announce they will resume the in-person celebration of honoring cancer survivors and their loved ones.

Two events will be hosted on National Cancer Survivors Day – Sunday, June 4 – from 1 to 3 p.m. One event will be held in Corvallis at the CH2M HILL Alumni Center on the campus of Oregon State University and the other in Newport at the Center for Health Education.

Both events are free to all. Guests will enjoy good food, an arts activity, conversing with community cancer resources, talks from Samaritan’s cancer care team and fellow cancer survivors, plus more.

For more information or to register, visit samhealth.org/CelebrateSurvivors or call the Samaritan Cancer Resource Center at 541-768-2171 (registration is encouraged, but not required).

BE FAST when every minute counts

When you see the warning signs of stroke, remember to BE FAST.

For every minute a stroke goes untreated and blood flow to the brain is blocked, a person loses about 1.9 million neurons. A quick and coordinated response is key. Time lost is brain lost, and patients, their family members, emergency responders and health care providers are all partners in responding to stroke.

Learning the following stroke symptoms could save a person’s speech, movement and memory. It could even save a life.



BE FAST

Balance – Is there a sudden loss of balance?

Eyes – Is there a sudden loss of vision in one or both eyes?

Face – Ask the person to smile. Is one or both sides of the face drooping?

Arms – Ask the person to raise both arms. Does one arm drift down?

Speech – Ask the person to repeat a simple phrase. Is their speech slurred or strange?

Time – If you see any of these signs, call 911 immediately.

Note the time when the symptoms first started. This information is important and can affect treatment options.

For more information, visit samhealth.org/Stroke.

Cut these tips out and put it in an easy-to-see spot like your refrigerator!

Could you be a ‘silent’ carrier of hepatitis C?

Hepatitis C is on the rise at a rate of 1 in 33 people being exposed to the virus. Most people are unaware they are infected until diagnosed with liver failure or liver cancer. Early symptoms such as fatigue are often difficult to recognize, making early diagnosis through proactive screening essential.

The virus spreads through infected blood and can take years to show symptoms. While some cases of the virus clear on their own, 80% of those infected develop chronic hepatitis C. Nearly 20% of chronic cases will develop cirrhosis, a condition that slowly shuts down the liver from the inside out through fibrosis.

“When you get a scar, the skin heals itself by laying down collagen,” said infectious disease expert Sugat Patel, MD, from Samaritan Health Services. “The virus damages the liver in a similar way. Your body will try to heal the liver, but it inadvertently causes fibrosis, a type of scarring that permanently damages your liver.”

Baby boomers currently make up the majority of cases due to untested blood transfusions and other exposures before

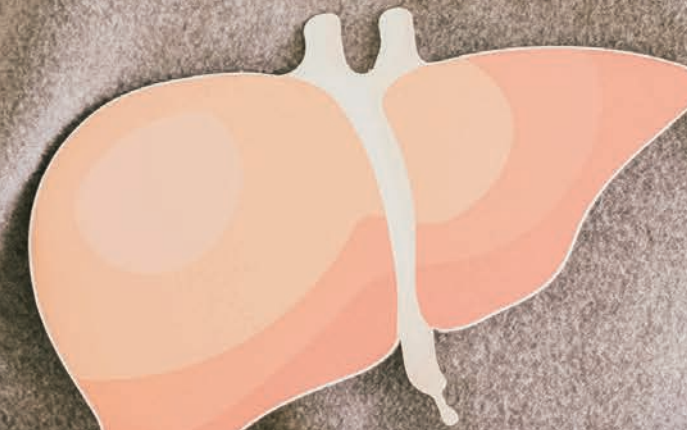
the virus was identified in 1989. However, according to the Centers for Disease Control and Prevention, cases are rising among young people, with shared needles the main cause of new infections. Infected mothers can also pass the virus to their babies.

“The good news is the treatment options for hepatitis C have greatly increased over the past decade,” said Dr. Patel. “The only treatment option used to be two to four months of chemo. Now most cases are treated by taking direct-acting antivirals — that target stages of the virus reproductive cycle — for two to three months with little to no side effects and an astonishing 95% success rate.”

People don’t often identify themselves as being at risk, but it’s safer to be screened and know you aren’t a transmitter.

“Get tested,” urged Dr. Patel.

Everyone should get tested at least once, especially those born between 1945 and 1965. Those engaging in high-risk behavior such as drug use or having multiple sexual partners should get tested every six months. Talk to your primary care provider about getting a hepatitis C antibody blood test.



Avoid mishaps in the great outdoors

Rain or shine, Oregonians love to head outdoors for adventure or exercise and thinking ahead can help you avoid a trip to an urgent care clinic or emergency department.

Here are some ideas to keep you healthy and safe at the beach or on a mountain trail.

Fun in the sun. Love to soak up the sun after a long winter? Slather on sunscreen, wear a hat that shades your ears and neck, and put on UV-blocking sunglasses. Light-colored and breathable clothing are helpful and, depending on the activity, you might want to wear sun-protective clothing. Find more tips in related article on page 7.

Keep your cool. Sunburn can be painful but too much heat can be downright dangerous. Take it easy during the hottest times of day and stay hydrated by drinking water regularly. Speaking of drinking, alcohol can impair your judgement so enjoy it in moderation or not at all.

Protect that noggin. Head injuries and trauma increase during the summer months, for both children and adults. Before biking, skateboarding, riding an ATV or engaging in any other fast-propelling activity, pop on a well-fitting helmet.

Nope to flip-flops. Pick appropriate footwear for the activity — and that rarely includes flip-flops! Even on the beach, broken glass and hot embers can hurt exposed toes. Hiking, biking, boating, climbing and other outdoor activities require different types of footwear to keep your feet and ankles safe and sound.

Be wise around water. Whether your activity takes you to the river, lake or sea, be extra careful. If you don't know how to swim, wear a life jacket. If you haven't piloted a boat in a while, take a refresher boat safety course. If you plan on tubing or floating, beware of potential hazards created by low water levels or flooding.

What level of care is needed? Some injuries or incidents can be treated with self-care while others may require urgent care or emergency care. Always call 911 for life-threatening injuries.

Here are a few examples:

- Minor sprains and strains can be treated at home using the RICE method: rest, ice the injury, compress the area with a bandage wrap and elevate the injured area. Use over-the-counter pain relievers (ibuprofen or naproxen) to reduce pain and swelling. If there's no improvement in a day or two, go to the doctor or an urgent care.
- Minor spine, back and sports injuries can be treated at an urgent care. Go to the emergency department if you experience a fall of more than six feet and have tingling, numbness or weakness, and if limbs are obviously broken or out of place.
- Most cuts through the skin can be treated in urgent care.
- For head injuries involving loss of consciousness, memory loss, unusual sleepiness, nausea or vomiting, go to an urgent care or emergency department. Children under the age of 2, anyone over age 75 and anyone using blood-thinning medication should always go to the emergency department for evaluation after experiencing a head injury.

Visit samhealth.org/CareNow to find the closest walk-in clinic in Benton, Lincoln and Linn counties. The Samaritan hospitals in Albany, Corvallis, Lebanon, Lincoln City and Newport offer emergency care 24/7.

Find relief from seasonal allergies



Flowers are blooming, grass is growing and allergy season is here. Are you someone who suffers from seasonal allergies, also known as hay fever? These bothersome symptoms may include sneezing, congestion, itchy dry eyes and runny nose.

"When suffering from allergies, it's hard not to feel miserable, but there is relief in sight," said Sarah de Forest, MD, a Samaritan family medicine physician in Corvallis.

Dr. de Forest offers the following helpful tips to manage your symptoms through the height of allergy season.

Work with your provider to find a prescription or over-the-counter allergy medicine that works for you.

Allergies can be treated with a variety of medicines. Antihistamines, decongestants and corticosteroid nasal sprays are some options. Some medications are for acute symptoms and should be used when you're having a reaction. Others are more preventive and are taken before a reaction occurs.

Use a nasal rinse to help clear your sinuses. Nasal rinses use a saline solution to help flush out mucus and allergens from your nose. It's a quick, effective and inexpensive way to relieve nasal congestion.

Keep an eye on your local pollen levels. Download a pollen tracking app or look at the news for the pollen forecast. When pollen counts are expected to be high, take allergy medicine and avoid outdoor activities, especially in the early morning. If you must go outdoors, wearing a surgical or N95 mask can help minimize allergy symptoms.

Have the air in your house as allergen-free as possible. This means using an air conditioner, if available, instead of opening windows. Try to keep the air dry by using a dehumidifier. Even a portable high-efficiency particulate air (HEPA) filter can help, especially in your bedroom.



Talk with your provider about allergy testing and allergy shots. If your symptoms fail to respond to conventional treatment, allergy testing is a good next step. These skin or blood tests help find which allergens trigger your symptoms. Allergy shots could be another option. These are a series of injections containing small amounts of the substances that cause your allergic reaction. Over time these shots can help reduce the immune system reaction that causes allergy symptoms.

Whether your allergies are mild or severe, help is out there, so don't suffer in silence! Ask your health care provider about treatment options at your next visit.

Does it matter what you eat while taking antibiotics?

Antibiotics may be needed for many types of bacterial infections, and what you eat while taking them can impact their effectiveness. Food can alter absorption of the antibiotic, while others may increase side effects and toxicities.

Emma Young, a pharmacy intern at Samaritan Albany General Hospital, provided some insight to common foods that can interact with antibiotics.

Foods affecting absorption

Minerals – Products such as multivitamins and antacids contain minerals – namely magnesium, calcium, aluminum, iron and zinc – that can bind with certain antibiotics, specifically tetracyclines and fluoroquinolones. This reduces your body’s ability to absorb the medication. This interaction can also occur with high-calcium foods such as dairy products, dark green vegetables such as spinach, and foods that are calcium-fortified such as orange juice or cereals.

Acidic foods – Citrus fruits and juices, soda, chocolate and tomato products are highly acidic, which can alter your stomach acid and affect how much medicine is absorbed.

How to take – The above-mentioned foods or products should be spaced out at least two hours after you take your antibiotic and six hours before your next dose. Pay attention to the label on your prescription bottle because some antibiotics are best absorbed with food, while others are best taken on an empty stomach.

Caffeine and alcohol

Alcohol – Evidence is mixed but recommendations are to abstain from alcohol throughout the course of antibiotics and for 72 hours after if you are taking metronidazole or trimethoprim-sulfamethoxazole, as the interaction can cause alcohol toxicity.

Caffeine – The antibiotic ciprofloxacin can reduce metabolism of caffeine which could lead to increased urination, shakiness and insomnia. Try to avoid or reduce your caffeine intake while on this medication.

Blood pressure caution

Linezolid – This antibiotic taken in addition to alcohol, aged cheese and soy products can result in increased blood pressure. It is best to avoid these products for at least 24 hours following a course of linezolid.

What to eat instead

Soup – Enjoy broth-based soups such as chicken noodle, ramen, miso or lentil. These soups often also have beneficial prebiotics that help healthy bacteria grow, as well as provide a source of hydration.

BRAT diet – This diet, consisting of bananas, rice, applesauce and toast, can help reduce diarrhea resulting from antibiotics.

Water – Staying hydrated is important, especially when you are fighting an infection.

Probiotics – Consuming probiotics can help provide beneficial bacteria to your system and may reduce diarrhea from antibiotics. This can be done through supplements or consuming fermented foods such as kombucha.

Work with a pharmacy you trust. Find a Samaritan Pharmacy location near you at [samhealth.org/Pharmacy](https://www.samhealth.org/Pharmacy).



Outreach nourishing for giver and receivers



Helen Beaman, LCSW, (right photo) teaches cognitive behavioral therapy techniques to the staff (left photo) at Grove Veterinary Clinic in Newport to help them cope with the challenges of their jobs.

Licensed Clinical Social Worker Helen Beaman likes to help people help themselves.

Recognizing the need for those from many professions to make sense of sometimes stressful or chaotic work, she has reached out to first responders, veterinary clinics and others to volunteer her expertise to help people cope with the challenges of their jobs.

“Community outreach is a cornerstone of what clinical social workers do,” said Beaman. “It is kind of an unspoken promise that we will always be contributing to our community and the betterment of society. I know how much information and education empowers people and helps them feel they can be their own advocates to improve their lives.”

A powerful example of Beaman’s outreach is sessions for veterinarians and staff at Grove Veterinary Clinic in Newport.

Beaman worked with Charles Hurty, DVM, medical director of Grove Veterinary Clinic and vice president of the Oregon Veterinary Medical Association, to develop cognitive behavioral therapy classes and monthly check-ins. The sessions address mental health concerns related to caring for sick, injured and dying pets, including suicide risk. One in six veterinarians has contemplated suicide at some point in their careers.

“My veterinary team is not immune from these challenges,” said Dr. Hurty. “We decided as a group that we did not want to have this experience anymore and that changes were needed.”

Beaman’s work with the veterinary clinic and other groups includes providing perspective and validation for experiences and emotions, helping people understand what is going on in their minds and bodies and giving them vocabulary and tools to work towards a healthier experience. Beaman feels it is important for professionals to be transparent with others and themselves about their challenges.

“The response was more than I could have ever expected or hoped for,” said Dr. Hurty. “People’s thoughts and feelings were validated. Helen has helped us understand our experiences and emotions and has driven us to be a healthier and happier team that can now thrive and innovate.”

Beaman finds this work nourishing.

“I think people forget how inspiring that kind of work can be,” Beaman said. “It gives back to me; it can be very rewarding. This is self-care.”

Helen Beaman, LCSW, cares for patients of Samaritan’s primary care clinics in Lincoln County.

Legacy of service provides flags for veterans in hospice

Some people have a gift for recognizing a need.

If you were around Gene Sanders, it happened all the time.

Like when he visited Samaritan Evergreen Hospice House in Albany, where his daughter Sarah Smith is a certified hospice and palliative nurse and his wife volunteers.

Gene Sanders was an Army veteran who served 42 years active duty and as a civilian. He noticed the service flags on some of the doors to the inpatient rooms.

“Does every veteran get a flag?” Gene Sanders wondered.

At the time, there were not enough.

So, Gene Sanders asked his daughter to carry a proposal to hospice leaders to provide flags for every veteran.

The service flags for veterans became a family project, which has been incorporated into the traditions at the hospice house. When a person dies, staff do a walk out with family to honor their loved one. If they are a veteran, the service flag is placed over the body and given to the family.

When Gene Sanders died in April 2022, his family decided to continue the flag program as part of his legacy of service.

“He always wanted to help fellow veterans,” Sarah Smith said. “He took it upon himself to help others.”

Dianne Sanders recalled how her husband used to invoke a higher power when he pitched his philanthropic ideas. It was a tactic she couldn’t refuse.

“He would come to me and say, ‘I think God’s telling me that we need to give this car to such and such person,’” Dianne Sanders said. “How do you argue with God?”

They could sell a vehicle and get a little money. But Gene Sanders always had someone in mind who could use their old car more.

Gene Sanders served three tours in Vietnam, where he was part of the military police, earning a Bronze Star Medal for meritorious achievement. He started out as an Army cook.

“He loved to cook,” Dianne Sanders said.



In memory of Gene Sanders, his family, including Dianne Sanders, left, and Sarah Smith, right, have continued providing military service flags to veterans at Samaritan Evergreen Hospice.

During his military career, the family lived in Georgia, where Gene Sanders and a team from his church regularly cooked meals at a homeless shelter, feeding as many as 300 people at a time.

“What we cook needs to be like something we would eat,” Gene Sanders declared.

He bought all the meat for the chili, spaghetti and other dishes he prepared at the shelter for more than five years.

When he was called to serve in South Korea, he went ahead to get things ready for his family’s arrival.

“He had everything all put together, including our rooms,” Smith recalled. “He tried to give us some familiarity and normalcy.”

She thinks that’s why it mattered to him that every veteran receives a service flag.

“He wanted to make sure veterans were not forgotten,” Smith said.

His passion and integrity also inspired her career.

“He found ways to serve others in all that he did,” Smith said. “Being a nurse is how I am able to serve others.”

Service flags for veterans at Samaritan Evergreen Hospice are donated by the family of Gene Sanders. Contributions can be made to the Hospice Fund through the Albany General Hospital Foundation at samhealth.org/Giving.



Honor a loved one this Memorial Day by crafting a heartfelt, handmade bouquet at Samaritan Evergreen Hospice on Thursday, May 25, from 2 to 6 p.m.

Everyone is invited to stop by this free event to build a bouquet in honor of a loved one.

Flowers have always been a part of observing the holiday once known as Decoration Day that started with people leaving bouquets at the graves of fallen Civil War soldiers. And flowers still fit with the spirit of the day.

“Take your bouquet somewhere special or bring it home with you to share sweet memories of those who are always on your mind and forever in your heart,” said Paula Pennington, hospice director.

Local florists have donated fresh flowers and other supplies and volunteers will be available to assist anyone who would like help. Registration is not required.

Samaritan Evergreen Hospice House is located in Albany at 4600 Evergreen St. SE. For more information, call 541-812-4662.

Schedule primary care appointments with MyChart

Scheduling a visit at a Samaritan family or internal medicine clinic is quick, easy and convenient for established patients using the MyChart patient portal.

When logged into MyChart on your computer, tablet or smart phone, just click Appointments & Visits at the top of your screen. Follow the prompts to schedule an in-person visit with your Samaritan primary care provider. You can also choose to be put on a waitlist in case a sooner appointment becomes available.

Scheduling is just one of the many features available through MyChart.

Log in today to find information about past and upcoming appointments, test results, medication information and more. You may also pay your bill, set up payment plans and request estimates for the cost of care.



If you don’t have a MyChart account, visit samhealth.org/MyChart to sign up for access to your convenient and secure online patient portal.



Graduating from pediatric care?

When and what to do

When will your child graduate from their pediatrician to a primary care provider? It's important to start this conversation early and have a plan in place well before it is time to make the transition. As your child grows, they should become more involved in their health care and be part of the process and plan.

The American Academy of Pediatrics' recommendation for this transition is not age specific. As of 2017, they encourage the provider, parent and child to make the decision together and consider the child's specific needs. Previously the academy had recommended age 21 (as of 1969) and age 18 (as of 1938).

Pediatricians and clinics can choose their own average age recommendation, which can be based on personal preferences. Also talk to your pediatrician about recommendations they may have for adult providers.

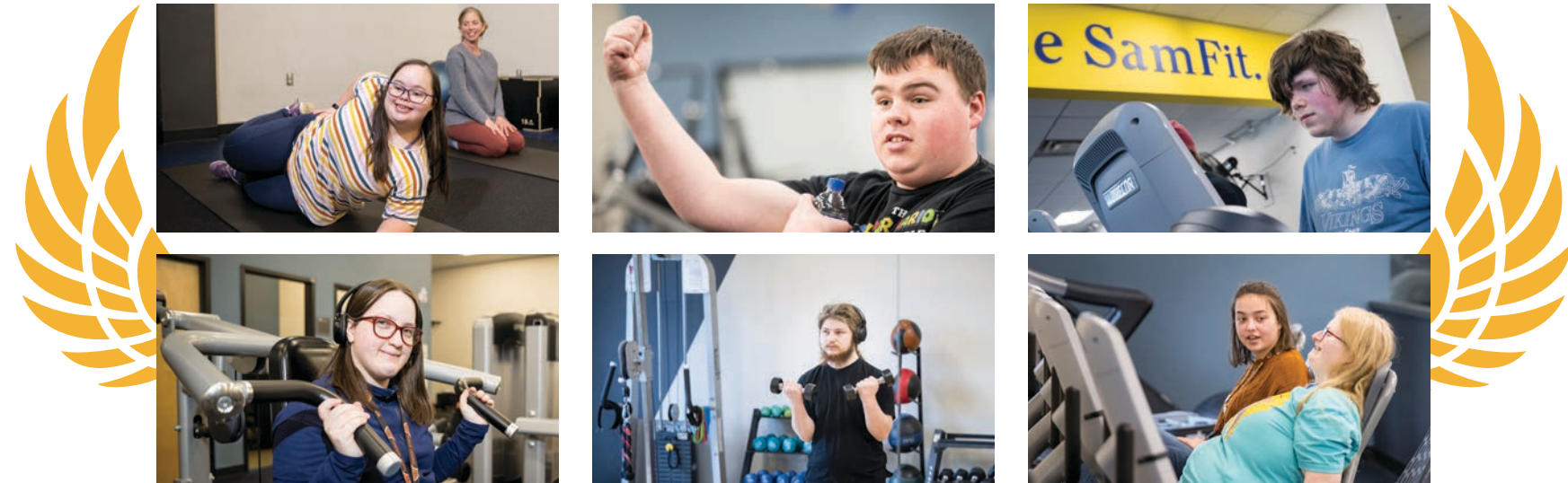
"There are many reasons to stay with a pediatrician past 18 or 21 years of age," said Shellie Russell-Skerski, MD, a Samaritan pediatrician in Newport. "Chronic health conditions such as asthma, congenital diseases or other problems are best cared for by a pediatrician. If your child has special needs, they could benefit from an ongoing relationship with their pediatrician. Mental, physical and emotional health should also be considered before transitioning to a PCP or other adult care provider."

Review these tips to help you plan for this transition:

- ✓ Start the conversation with your child and their pediatrician by age 15.
- ✓ In Oregon starting at age 14, adolescents can seek treatment for mental and reproductive health care independently. This is another way to have your child start taking an active role in their health care.
- ✓ Have your child take on more responsibility as they become an adolescent, such as making appointments and talking to the doctor.
- ✓ Keep a file with all your child's important medical information and have your child start managing it. You will not have access to your child's medical information after they turn 18 years old unless they grant you proxy access. Discuss this with your child and their health care team.
- ✓ Start looking for an in-network provider with your child. It can take a while to find someone who fits the needs of your child and who they will be comfortable with.

Prepare and empower your child to take over their health care planning. Work with their pediatrician and together come up with a plan and graduation age that works for everyone. Learn more about proxy MyChart access at samhealth.org/MyChart.

SamFit helps students spread their WINGS



Top left to right: Laura Estreich stretches in front of teacher Rachel Stalter, Nick Shaffer shows his muscle tone, Zarron Amelsberg uses a treadmill.

Bottom left to right: Hannah Meyer works on upper body strength, Lemmy Jensen does arm curls and Maycee Mac Kimmie uses a recumbent bike with coaching from WINGS Assistant Hayley Lemke-Davis.

On mats in a corner of Corvallis' SamFit, Crescent Valley High School student Laura Estreich stretches into yoga poses as Crescent Valley special education teacher Rachel Stalter provides instruction.

"I love being active," Estreich said. "I'm trying to keep healthy."

Learning an exercise routine with proper techniques is what instructors Stalter and Angela Faulk hope to instill as a building block to a healthy life for their at-risk students.

"I learned that keeping a resolution of trying to go to the gym is not hard," said Lemmy Jensen during a workout break. "I enjoy this because I get experience exercising."

These young adult students with special needs are from Corvallis School District's Work Experience, Instruction, Networking, Goal-Setting and Self-Determination or WINGS program. The program serves students between the ages of 18 to 21, with mild to moderate disabilities in transitioning to independent or group living environments. SamFit gives participants complimentary access to the club for the hour-long session.

"It's an amazing opportunity for them to just experience real life activities," said Erika Hanselman Green, Corvallis SamFit fitness center coordinator. "We have them all come in and sign up to be a member, get their own key card and sign their membership agreement. They do all these real-life things they might do when they're not part of the program anymore."

A handful of students come through the facility daily assisted by instructors and aids. The students assimilate with the club's members using treadmills, exercise bikes, free weights and weight machines.

"I'm so grateful to live in a community that supports our program and partner with SamFit," said Stalter.

The WINGS instructors approached Hanselman Green about using SamFit after a school district construction project shut down the gym they were using.

"At that gym, it was isolated, they were not being exposed to etiquette and learning from the examples of other adults exercising," explained Stalter.

According to the CDC, adults with disabilities are more likely to have obesity, heart disease, stroke, diabetes or cancer than adults without disabilities.

"My hope is by having students participate at SamFit they are developing healthy habits that allow them to live a healthy and productive life," Stalter said. "Opportunities like this can make a difference."

Student Hannah Meyer will be graduating out of WINGS this spring. She said she feels good that she's actually doing some exercises and finds it energizing.

"I was actually thinking that maybe I can have my mom work out with me after I graduate," said Meyer. "We can use the gym here at SamFit."



Colorful cowboy salad

Recipe adapted from [foodhero.org](https://www.foodhero.org)

This recipe is full of vegetables and legumes, which are good sources of fiber and protein. Use as a filling for tacos, burritos or wraps, on a burger, over a baked potato or as a snack with tortilla chips. For variety, try adding other vegetables such as sweet or hot peppers, cucumber or zucchini.

Giddy up and make this quick and easy recipe

Ingredients

- ❑ 2 (15-ounce) cans black-eyed peas or black beans (try a mix, or other types)
- ❑ 1 1/2 cups corn (canned, frozen or fresh)
- ❑ 1 bunch cilantro
- ❑ 1 bunch green onions (about 5 green onions)
- ❑ 3 medium tomatoes

Preparation time: 20 minutes | Servings: 15 | Nutrition information per 1/2 cup serving: 90 calories, 3.5 g fat, 260 mg sodium, 14 g carbohydrates, 4 g fiber, 4 g protein.

- ❑ 1 avocado (optional)
- ❑ 1 tablespoon vegetable oil
- ❑ 2 tablespoons vinegar or lime juice
- ❑ 1/2 teaspoon each salt and pepper

Directions

1. Drain and rinse black-eyed peas (or black beans) and corn. Chop cilantro and green onions.
2. Dice tomatoes and avocado.
3. Combine all veggies in a large bowl.
4. Mix oil, vinegar, salt and pepper in a small bowl.
5. Pour oil mixture over veggies and toss lightly.

Visit samhealth.org/RecipeMinute for more healthy recipes.

Local graduates fulfill career passions at Samaritan



Cameron Vasquez (above) began his health care career as an emergency department scribe, an experience that sparked his passion for emergency care and set him on a journey to become a registered nurse.

"I fell in love with the ED as a scribe. I was able to be right there with the doctors in emergency situations, but I wanted to play a bigger role in patient care," said Vasquez.

Vasquez enrolled in an EMT program and was then hired as an emergency department tech where he was able to play a part in patient care including CPR, EKGs, wound care and splinting bones.

While Vasquez was excited to provide care to patients, he wanted to do more.

"I realized I really wanted to be a nurse, so I enrolled in the nursing program at Oregon Coast Community College, which is a two-year program," said Vasquez. "It was a tough program but amazing and well worth it."

When Vasquez graduated from the program in 2022 he was immediately hired into the new nurse graduate program at Samaritan North Lincoln Hospital.

"I love working with the ED team here; they are amazing," said Vasquez. "And I love being a nurse and working at the bedside caring for our patients and comforting them and their family members with a hug or kind words."

Passion for work extends across all of Samaritan, including in the thousands of administrative and technical roles that help ensure operations run smoothly each day.

Visit samhealth.org/JoinUs to explore career opportunities at Samaritan.



Corvallis High School and Oregon State University alum Noah Seumalo (above) was often his family's "IT guy" growing up and has now found his niche with Samaritan's Information Services Department.

Seumalo first connected with Samaritan as a student athlete playing for Oregon State's football team.

"The team offers a program called Beyond Football that helps guide players in planning for life after college. Through that I learned that Samaritan had jobs that aligned with my computer science education and interest," said Seumalo.

Seumalo joined Samaritan in 2022 as a systems analyst. He works 100% remotely providing a wide variety of tech support for corporate applications, including everything from login issues to upgrading applications for the organization.

"Working remotely can be challenging when you're learning a new position, but I work with a great team that respects one another and balances a dedication to excellence and productivity with having fun together," said Seumalo.

Additionally, Seumalo enjoys being part of an organization that makes a difference in the community.

"The level of satisfaction and fulfillment I have from working for an organization that really makes a difference in the lives of the patients we care for and the community we serve is not something I think I could find in a corporate setting," said Seumalo.





Samaritan welcomes new health care providers



Mary Abraham, MD, has joined Samaritan Rheumatology. She earned bachelor's and master's degrees at Union College and a medical degree at Albany Medical College. She completed residency training at Drexel University College of Medicine and a fellowship in rheumatology at Emory University School of Medicine.

[Learn more at samhealth.org/bio/mabraham](https://samhealth.org/bio/mabraham).



Tyler Andrea, DO, has joined Samaritan Kidney Specialists – Corvallis. He earned a bachelor's degree at University of Wisconsin-Parkside and a medical degree at Western University of Health Sciences College of Osteopathic Medicine of the Pacific-Northwest. He completed residency training at St. John Medical Center and a fellowship in nephrology and hypertension at Allegheny General Hospital.

[Learn more at samhealth.org/bio/tandrea](https://samhealth.org/bio/tandrea).



Emily Balsler, MD, has joined Samaritan Medical Group Family Medicine – Ninth St. She earned a bachelor's degree at University of Puget Sound and a medical degree at Creighton University School of Medicine. She completed residency training at Valley Medical Center.

[Learn more at samhealth.org/bio/ebalsler](https://samhealth.org/bio/ebalsler).



Kristen Bracklein, DO, has joined Samaritan Waldport Clinic. She earned a bachelor's degree at Kalamazoo College and a medical degree at University of Osteopathic Medicine and Health Sciences. She completed residency training and an internship at Bi-County Community Hospital.

[Learn more at samhealth.org/bio/kbracklein](https://samhealth.org/bio/kbracklein).



Tatiana Brinckerhoff, MD, FAAP, has joined Samaritan Pediatrics. She earned a bachelor's degree at Estácio de Sá University and completed residency training at East Carolina University, Hospital Municipal Lourenco Jorge and Nassau University Medical Center. She is a fellow of the American Academy of Pediatrics.

[Learn more at samhealth.org/bio/tatianab](https://samhealth.org/bio/tatianab).



Sarah de Forest, MD, has joined Samaritan Medical Group Family Medicine – Ninth St. She earned a bachelor's degree at University of Pittsburgh and a master's degree at University of California Berkeley. She completed a medical degree at University of Illinois at Chicago and residency training at Good Samaritan Regional Medical Center.

[Learn more at samhealth.org/bio/sdeforest](https://samhealth.org/bio/sdeforest).



Abigail "Abby" Demchak, LCSW, has joined Samaritan Lebanon Health Center. She earned a bachelor's degree at Western Oregon University and a master's degree in social work at Pacific University.

[Learn more at samhealth.org/bio/ademchak](https://samhealth.org/bio/ademchak).



Karlei Drahn, PA-C, has joined Samaritan Heart Center. She earned a bachelor's degree at Oregon State University and a master's degree at University of Wisconsin – La Crosse. She earned a master's in physician assistant studies at Oregon Health Sciences University School of Medicine.

[Learn more at samhealth.org/bio/kdrahn](https://samhealth.org/bio/kdrahn).



Maureen English-Cremeans, FNP, has joined Samaritan Palliative Care. She earned a bachelor's degree and a master's degree at Fairleigh Dickinson University. She earned a master's degree to become a family nurse practitioner at Frontier Nursing University and completed a fellowship in palliative care at Veterans Affairs Medical Center (Bronx).

[Learn more at samhealth.org/bio/maureene](https://samhealth.org/bio/maureene).



Ryan Ervin, LCSW, has joined Samaritan Waldport Clinic. He earned a bachelor's degree at Western Oregon University and a master's degree in social work at Pacific University.

[Learn more at samhealth.org/bio/rervin](https://samhealth.org/bio/rervin).



Christopher Freeman, PA-C, has joined Samaritan Family Medicine Resident Clinic – Lebanon. He earned a bachelor's degree at University of Montana and a master's in physician assistant studies at Rocky Mountain College.

[Learn more at samhealth.org/bio/cfreeman](https://samhealth.org/bio/cfreeman).



Philip Klineburger, PhD, has joined Samaritan Neuropsychology – Albany. He earned a bachelor's degree at Longwood University and a master's degree and doctorate degree at Virginia Polytechnic Institute and State University. He completed residency training at Neuropsychological Services of New Mexico and an internship at University of Texas Health Science Center at Tyler.

[Learn more at samhealth.org/bio/philipk](https://samhealth.org/bio/philipk).



Robb Larsen, MD, has joined Samaritan Orthopedics & Podiatry – Newport. He earned a bachelor's degree at University of California at Davis and a medical degree at Tulane University School of Medicine. He completed residency training at Los Angeles County-Harbor-UCLA Medical Center.

[Learn more at samhealth.org/bio/rlarsen](https://samhealth.org/bio/rlarsen).



Christina Leach, FNP, has joined Samaritan Waldport Clinic. She earned a bachelor's degree at East Tennessee State University and a master's degree to become a family nurse practitioner at United States University.

[Learn more at samhealth.org/bio/christinal](https://samhealth.org/bio/christinal).



Sea-oh McConville, DO, has joined Samaritan Family Medicine Resident Clinic. She earned a bachelor's degree at Oregon State University and a medical degree at Western University of Health Sciences College of Osteopathic Medicine of the Pacific-Northwest. She completed residency training at St. John Medical Center.

[Learn more at samhealth.org/bio/seaohm](https://samhealth.org/bio/seaohm).



Jessica Mitchell, MD, FACOG, has joined Samaritan Obstetrics & Gynecology – Corvallis. She earned a bachelor's degree at The Pennsylvania State University, a master's degree at Oxford University – Hertford College and a medical degree at Alpert Medical School of Brown University. She completed residency training at University of Rochester Medical Center. She is a fellow of the American Congress of Obstetricians and Gynecologists.

[Learn more at samhealth.org/bio/jemitchell](https://samhealth.org/bio/jemitchell).



Mychall Raymond Pagulayan-Sy, MD, has joined Samaritan Medical Clinics – North Albany. He earned a bachelor's degree at University of California Irvine and a medical degree at University of the East Ramon Magsaysay Memorial Medical Center. He completed residency training at Good Samaritan Regional Medical Center.

[Learn more at samhealth.org/bio/mychallp](https://samhealth.org/bio/mychallp).



Rebecca Pestle, PA-C, has joined Samaritan Internal Medicine – Corvallis. She earned bachelor's degrees at Texas Christian University and Emory University and a master's in physician assistant studies at Rocky Mountain College.

[Learn more at samhealth.org/bio/rpestle](https://samhealth.org/bio/rpestle).



Trevor Peterson, PA-C, has joined Main Street Family Medicine. He earned a bachelor's degree at Corban University and a master's degree in physician assistant studies at University of Washington School of Medicine, MEDEX Northwest.

[Learn more at samhealth.org/bio/trevorp](https://samhealth.org/bio/trevorp).



Natalie Pexton, MD, MPH, has joined Mid-Valley Children's Clinic. She earned a bachelor's degree at Dartmouth College and graduate degrees at Loyola University, Chicago and Oregon Health & Science University. She earned a medical degree at Oregon Health Sciences University School of Medicine and completed residency training at Phoenix Children's Hospital.

[Learn more at samhealth.org/bio/npexton](https://samhealth.org/bio/npexton).

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Program addresses barriers to stable housing in Linn County

The knock on the door of Shirley Byrd’s Lebanon home one frigid December night was unexpected. It was 9:30 p.m. and snowing outside.

When Byrd opened the door, she recognized a woman she had seen in her neighborhood collecting cans. She was soaking wet and shivering.

“Can I come in and get warm for just 10 minutes please?” the woman asked.

Byrd welcomed her inside.

“Absolutely,” she replied. “Come in and get warm.”

As her guest recovered, the two women talked.

“Why aren’t you at the shelter?” Byrd asked.

“There is no shelter,” the woman told her.

Byrd was stunned and unaware of the unmet needs of some of the most vulnerable people in town.

It was the catalyst for a year-long journey to learn more about why there was no shelter, culminating with the creation of the Family Assistance and Resource Center in 2018.

As a former nurse, Byrd saw the invisible barriers that prevent people from regaining stable housing. With funding from InterCommunity Health Network Coordinated Care

Organization through a Delivery System Transformation pilot project, she was able to spread the promising practices that an outreach team from Community Services Consortium was doing in Benton County, changing it to suit the circumstances in rural East Linn County.

The nonprofit organization establishes trust and inspires hope by providing resources, services and education to people experiencing homelessness and housing instability.

Five years later, through collaborative community efforts, huts providing shelter for people who are unhoused recently opened in Sweet Home.

When Byrd started out, she and other volunteers carried supplies in backpacks to people staying in camps on abandoned property, in burned out houses, even in rock quarries.

In 2020, the Sweet Home Police Department donated an old ambulance to the program to transport larger items and carry more supplies.

It was the onset of the COVID-19 pandemic, and other agencies and organizations had halted their services. But not Byrd.

“We filled the ambulance with resources and items for people to shelter in place,” she recalled.

Byrd recalled how she helped a couple living in a tent in Lebanon, where camping is prohibited. Authorities had issued several citations. But they had no other place to live after being evicted from an apartment.

Some people are skeptical about the ambulance. Is it really the authorities in disguise?

“It can take 50 contacts to build trust and one broken promise to destroy it,” Byrd said.

A few months later, the couple was camped near Sweet Home. Byrd was doing outreach nearby when she was summoned to check on the man who was having a medical emergency from injecting drugs.

At first, he refused care. Only Byrd could convince him to go to the hospital, where he was treated for a life-threatening infection in the ICU. The man and his fiancé began their recovery and have been sober two years.

“They went from being dependent on public services to now working full time and contributing back to the community,” Byrd said. “It’s been amazing to watch.”



Learn more about the Family Assistance and Resource Center at FACForTheHomeless.org. Also visit IHNtogether.org/Transformation to learn more about other Delivery System Transformation pilot projects

Continued from page 24



Cheryl Shannon, FNP, has joined Samaritan Surgical Specialists. She earned a bachelor’s degree from Western Governors University and a master’s degree at University of South Alabama. [Learn more at samhealth.org/bio/cheryls](https://samhealth.org/bio/cheryls).



Emily Webber, PA-C, has joined Samaritan Albany Surgical Associates. 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. [Learn more at samhealth.org/bio/ewebber](https://samhealth.org/bio/ewebber).



Amber Subialdea, NP, has joined Samaritan Women’s Health – Newport. She earned a bachelor’s degree at Texas Women’s University and a master’s degree to become a nurse practitioner at Frontier Nursing University. [Learn more at samhealth.org/bio/asubialdea](https://samhealth.org/bio/asubialdea).



Coastal donors give to support future generations in the community

Working their land in the meadows of the Oregon Coast Range along the Siletz River, Tim and Susan Miller (pictured above) are well aware of the inherent dangers of forestry and farming — and the importance of a nearby quality hospital for their emergency and routine health care needs.

That’s why the Millers have regularly donated to the Pacific Communities Health District Foundation for decades and have included the foundation in their estate plan.

“We just need to do all we can before we need it,” Tim said about their support of the Newport hospital, located a few miles southwest of their family farm.

One way to give is through estate planning, with donors directing how they want their gifts to be used. If they give to an endowment fund, the full amount of the gift is received by the foundation tax-free, the principal of the gift is preserved, and the earnings on the principal are used to fund the important projects of the Samaritan foundation chosen by the donor.

“Even though we won’t be around to utilize the hospital after we’ve passed, we still have family in the area that will be using the hospital and, quite frankly, we care about the community,” Tim said.

Tim has supported Pacific Communities Health District Foundation since 1992, by serving as a board trustee and through charitable giving. The Millers are members of Samaritan Health Services’ President’s Society in recognition of their ongoing lifetime contributions to Samaritan Foundations.

You can make an impact by joining a Samaritan giving society

In 2022, donors contributed more than \$6.1 million to their local Samaritan-affiliated hospital foundations in support of unique world-class facilities, programming, cutting-edge technology, healing and compassionate environments, and growing and developing health care professionals.

Continued on next page.

As a nonprofit organization, Samaritan Health Services relies on philanthropic support from the community to continue to provide exceptional health care to residents and visitors throughout the mid-Willamette Valley and central Oregon Coast.



Giving societies

Generations of donors have helped ensure the highest quality care at Samaritan. To recognize the generosity of donors who support Samaritan’s mission of “building healthier communities together,” the Samaritan Foundations offer special recognition to donors in the following giving societies.

President’s Society: Honors those who give a minimum of \$25,000 annually or \$50,000 cumulatively over a lifetime.

Partners in Health Society: Honors those who give between \$5,000 and \$24,999 annually.

Samaritan Society: Honors those who give \$1,000 to \$4,999 annually.

Legacy Society: Honors all those who have included one or more of the Samaritan Foundations in their estate plans.

PRIDE Partners: Recognizes corporate sponsors and donors who share Samaritan’s PRIDE values of passion, respect, integrity, dedication and excellence.

Society members enjoy exclusive communications from Samaritan leadership and invitations to donor appreciation events and receptions.

To learn more, watch the Millers in the Legacy Giving video online at samhealth.org/Endowments.

Express your gratitude, *thank a health care worker*



Has a Samaritan employee left a lasting impression?

Express your gratitude for a Samaritan staff member who made an impact in your health care experience at samhealth.org/ShiningStar.



Samaritan Foundations recognizes partnership with local business donors

PRIDE Partners are generous business donors who support Samaritan's values of passion, respect, integrity, dedication and excellence, also known as PRIDE. Through these partnerships more than \$367,500 was donated in 2022 to support cancer care, mammography care, patient support, substance use disorders treatment and much more at Samaritan hospitals and clinics.

Health Services President/CEO Doug Boysen. "They each play an important role in building healthier communities together through their investments in our local hospitals and clinics. Many of them have been contributing consistently for years because they care so deeply about the health and well-being of their friends and neighbors. I'm grateful for these partnerships."

"The generosity of our business partners across Benton, Lincoln and Linn counties is an inspiration," said Samaritan

Health Heroes (\$10,000+)



Community Champions (\$5,000+)

Citizens Bank	KeyBank
Corvallis Radiology, PC	Pacific Power
John Dinges Landscape Co.	Western University, COMP-Northwest

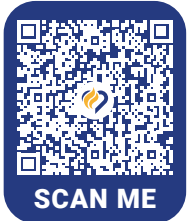
(Donor list reflects contributions made from Jan. 1 to Dec. 31, 2022)

For a complete listing of all of our PRIDE Partners and more information about the program, please visit samhealth.org/CorporateGiving.

Resources to help you be well



Classes and support
Samaritan Health Services offers a wide variety of support groups, health education classes and seminars to help community members find the support and gain the 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.



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.



WINGS student Laura Estreich stretches during a workout at Corvallis' SamFit location.
Learn more on page 19.



**Samaritan
Health Services**