TJ’s new home
Children’s Hospital relocating to Columbia Regional

PLUS
Working together
The pros of a collaborative health system

Know the patient safety goals?
Play a word game, enter to win

Stay warm
Taco chili recipe inside
TJ’s new home
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In August, University of Missouri System President Gary Forsee announced his vision for a consolidated health system, bringing together the University of Missouri’s School of Health Professions, School of Medicine, Sinclair School of Nursing, University Physicians and University of Missouri Health Care. The group is overseen by a vice chancellor, who reports to MU Chancellor Brady Deaton, PhD. Harold Williamson Jr., MD, MSPH, a longtime School of Medicine faculty member and physician, was named interim vice chancellor Sept. 8.

“The role of the interim vice chancellor is really two-part,” Williamson said. “First, I’m helping the president and chancellor create the job, understanding what it needs to be. Secondly, doing the job involves ensuring the coordination of activities across the three schools, between the physicians and the hospital system.”

As an academic health center, no one entity can truly stand alone. Learning, research and patient care are intertwined. For example, the physicians who are members of University Physicians care for our patients at University of Missouri Health Care facilities and are also faculty members at the School of Medicine. Medical students, residents and fellows learn from veteran health care professionals while interacting with patients in hospitals and clinics. Likewise, many of the faculty members at the Sinclair School of Nursing and the School of Health Professions are also teachers of students at clinics or hospitals in the health system. Researchers at all three schools play an integral role in scientific discoveries that can ultimately bring better clinical care to the bedside.

“I think teaching collaboration makes perfect sense,” Williamson said. “When I practice as a physician, I work with lots of different types of professionals — nurses, respiratory therapists, occupational therapists and others — and the patient is at the center. The best care of the patient is what we’re all about. Right now when we’re teaching students, the students learn in their different units. We expect them to be able to put that all together when they start taking care of patients. I think we can do a better job. I think the faculty and certainly the deans of the schools are excited about the possibilities.”

In November 2008, Williamson hosted the first in a series of town hall meetings for all employees. He was joined by Hung Winn, MD, JD, MBA, University Physicians chair; Robert Churchill, MD, MU School of Medicine interim dean; Judith Miller, PhD, RN, MU Sinclair School of Nursing dean; Richard Oliver, PhD, MU School of Health Professions dean; and Jim Ross, University of Missouri Health Care chief executive officer. For a recap of the November meetings, please visit www.muhealth.org/facultystaff.

Williamson and the health system leaders are routinely meeting to discuss concerns and opportunities to work together in strategic planning. The development of an advisory board for University of Missouri Health Care is also under way.

“The advisory board will help the president, chancellor, Mr. Ross and me with business decisions for the hospitals and clinics,” Williamson said. “Right now our system has the opportunity for great input from physicians, nurses and others. What we don’t have right now is a lot of input from the business community. These individuals can help us...
determine the best business strategy.”

Updates and announcements on the academic health system will be shared with employees through internal communication, such as the InSight newsletter. Comments, suggestions and ideas for town hall meetings can be sent to insight@health.missouri.edu.

Leading the health system

Harold Williamson Jr., MD, MSPH, is approachable, open to suggestions and known for his consensus-building style. He has served the University of Missouri for 28 years. Since 1998, he has led MU’s Department of Family and Community Medicine, which is consistently ranked among the top three family medicine programs nationally by U.S. News and World Report. While serving as interim vice chancellor, he plans to continue practicing medicine at University Physicians-Green Meadows, where he sees patients of all ages.

“It’s incredibly valuable for me as a physician to have these continuous relationships with people that teach me so much about life and courage in the face of adversity,” Williamson said. “I grow older with my patients. It’s a tremendous privilege.”

University of Missouri Health Care

Patients from every county in the state are served by University of Missouri Health Care’s multiple hospitals and clinics. The comprehensive health-care network began when University Hospital opened in 1956. Today, University of Missouri Health Care includes University Hospital and Clinics, Children’s Hospital, Columbia Regional Hospital, Ellis Fischel Cancer Center and University Physicians, all based in Columbia. The health system also includes a long-term acute care facility, Missouri Rehabilitation Center, in Mount Vernon, Mo. Learn more at http://www.muhealth.org.

James H. Ross,
Chief Executive Officer

Dr. Williamson at a glance …

Hometown: Heron Lake, Minn.
Family: Wife, Mary Todd Williamson, PhD, psychologist at MU; and two adult sons, Boyd Williamson, graduate student in Oakland, Calif., and Scott Williamson, graduate student in Seattle, and daughter-in-law Afton
Hobbies: Woodworking, fly fishing, hiking, horseback riding, spending weekends with family in the Missouri Ozarks
Pets: One dog, a Labrador-mixed breed
Favorite books: Good to Great by Jim Collins and Riders of the Purple Sage by Zane Grey
Favorite music: Jazz, particularly Miles Davis, and cowboy songs

Hung Winn, MD, JD, MBA
Chair

University Physicians is mid-Missouri’s largest multi-specialty group. With more than 400 physicians trained in nearly 70 specialties and subspecialties, our physicians provide world-class care. Members of University Physicians also serve as faculty members at the University of Missouri’s School of Medicine, teaching medical students and residents, and conducting research. This allows our physicians to provide the latest advances in medicine. University Physicians offers primary and specialty care at several clinic sites in Columbia and in communities throughout the state. Learn more at http://www.muhealth.org/physicians.

Hung Winn, MD, JD, MBA
Chair

Dr. Winn at a glance …

Hometown: Thanh Hai, Vietnam
Family: Wife Lee; son John Winn, MD, daughter-in-law Niyati Winn, MD, and grandchildren Kaser and Naya; daughter Jessica Winn, MD; son Justin Winn, medical student
Hobbies: Golf, tennis and traveling
Pet: A shih tzu
Favorite book: Good to Great by Jim Collins
Favorite music: Classical

University Physicians

Hung Winn, MD, JD, MBA
Chair

Mr. Ross at a glance …

Hometown: Memphis, Tenn.
Family: Wife Doris; daughter, Staci and son-in-law Gregg; grandchildren Merideth, Matthew and Julia
Hobbies: Fishing and golf
Pet: A cocker spaniel, Ben
Favorite book: Crucial Conversations by Kerry Patterson, Joseph Grenny, Ron McMillan and Al Switzler
Favorite music: Blues
University of Missouri’s School of Medicine has improved health, education and research in Missouri for more than 160 years. MU physicians treat patients from every county in the state, and MU is a primary provider of training for all physicians in Missouri. The School of Medicine’s more than 650 faculty physicians and scientists educate approximately 1,000 medical students, residents, fellows and other students seeking advanced degrees. Their research is focused on potentially lifesaving discoveries that address the most prevalent health problems. Learn more at http://som.missouri.edu.

Richard Oliver, PhD
Dean

Dr. Oliver at a glance ...
Hometown: Wellsville, Mo.
Family: Wife Carol Oliver, a former University of Missouri Health Care infection control nurse and currently state director for Heifer International; daughters Jill and Christa; grandchildren Rory, Ian and Cate
Hobbies: Photography
Pets: No pets, but two “granddogs”
Favorite book: Three Cups of Tea by Greg Mortenson and David Oliver Relin
Favorite music: Jazz and acoustic guitar

The MU Sinclair School of Nursing provides educational programs for traditional students, college graduates seeking a career change and graduate programs for nurses seeking master’s or doctoral degrees. Fall 2008 enrollment included more than 800 undergraduate students and 238 graduate students. The Sinclair School of Nursing’s research program is dedicated to improving patient care. Faculty members are involved in diverse projects and engage in cross-disciplinary research with other schools at the University of Missouri. Learn more at http://nursing.missouri.edu.

Judith Fitzgerald Miller, PhD, RN
Dean

Dr. Miller at a glance ...
Hometown: Milwaukee, Wis.
Family: Daughters Kimberly, Elizabeth and Patricia; grandchildren Lillie and Dosia
Hobbies: Art appreciation, sports, including basketball, football and downhill skiing; planting flowers and being outdoors
Favorite book: A Painted House by John Grisham; mystery authors such as Diane Mott Davidson
Favorite music: Classical symphonic music, Irish music and baroque music

University of Missouri’s School of Health Professions on a campus with an academic health center and the only allied health school in the university of Missouri system, the School of Health Professions is uniquely positioned to educate highly qualified health care professionals. Graduates fulfill critical roles in health care, including occupational therapy, physical therapy, respiratory therapy and ultrasonography. Enrollment at the school reached record highs in 2008 with 1,000 undergraduate and 120 graduate students. The school is committed to education, research and services related to health promotion, disability prevention and rehabilitation. Learn more at http://www.umshp.org.

Robert Churchill, MD
Interim Dean

Dr. Churchill at a glance ...
Hometown: Rockford, Ill.
Family: Wife Barbara; four children (ages 29-15): Andy, Anne, David and Emily; and daughter-in-law Abby
Hobbies: Golf
Pet: An Australian Shepherd mix named Sallie
Favorite book: Sarum by Edward Rutherfurd
Favorite music: Classical and music from the 1940s to 1960s
Elizabeth James, MD, wasn’t looking to make history in 1971 when she contacted the Highway Patrol. She was simply trying to get a very tiny, sick baby from Rolla, Mo., to University Hospital in Columbia for lifesaving medical care.

“The Highway Patrol was just so phenomenal,” James said. “The pilot was so good. He wanted to do anything he could do to help a sick baby.”

James did accomplish what she set out to do — rescuing the baby, who only weighed 1,100 grams. She also planted the seed for today’s Children’s Hospital Transport Service. The transport team celebrated its 35th anniversary in October 2008, tracing the origins of the first official transport team to 1973.

“We’ve come a long way from our first transport unit,” James said. “When the NICU first started, we basically had a car and a mobile incubator that plugged into the car’s ciga-
Elizabeth James, MD, established the Neonatal Intensive Care Unit (NICU), helping referring physicians transport babies to University Hospital. The Missouri State Highway Patrol often assisted by providing air transportation.

James borrowed a Volkswagen Karmann Ghia from Gerard VanLeeuwen, MD, for many of the first land transports.

Mid-Missouri’s only neonatal transport team was created in 1973. To this day, Children’s Hospital Transport Service remains the region’s only neonatal transport team.

The introduction of artificial surfactant had a tremendous impact on the respiratory health of infants — drastically cutting ventilator time and saving many lives. Respiratory therapists were added to the transport team in the 1980s.

The Staff for Life Helicopter Service began at University Hospital in 1982.

1971

1970s

1973

1980s

The Staff for Life Helicopter Service began at University Hospital in 1982.

The first automobile used was not an ambulance, but instead a 1969 Volkswagen Karmann Ghia owned by pediatrician Gerard VanLeeuwen, MD, who let James and other physicians borrow his car for the worthy cause.

Before there was a team designated to transporting infants and children, a typical transport was spurred when a physician from a rural area contacted James to seek advanced care for a critically ill infant. If air transport was needed, she called the Highway Patrol. She threw necessary supplies into a paper bag and rushed to Columbia’s airport to board a helicopter or plane, often a single-engine Cessna plane.

By 1973, the need for infant transports had not declined. A program was organized, led by a physician performing a fellowship at University Hospital. Nurses occasionally assisted with the transports.

“Before we had a transport team, a doctor had to decide whether to close up shop or ride with the baby,” said John Pardalos, MD, medical director of the transport service and Perinatal Pediatric Outreach Program. “In many small towns if the doctor rode with the really sick patient to the hospital, it left no pediatrician in town.”

Pardalos now leads the team with pediatric intensivist Patricia Wankum, MD. Each team includes a registered nurse, a respiratory therapist and an emergency medical technician (EMT). Each member has experience serving pediatric or neonate patients, has completed specialized training and constantly refreshes his or her skills through courses and workshops.

“Our 26-member transport team is highly skilled in perinatal, neonatal and pediatric transportation,” said Judy Bildner, RN, an advanced practice nurse at Columbia Regional Hospital’s newborn intensive care unit.

Bildner joined the team in 1982 and now serves as coordinator of the transport service. Of all the changes she has observed during her tenure, she said the biggest have been medical advances that have led to better tools and technology to care for the youngest, smallest patients.

The use of surfactant therapy in the 1980s, for example, had a drastic effect on babies, drastically cutting ventilator time and saving many lives. Respiratory therapists were also added to the transport team in the 1980s.

In 1993, Children’s Hospital was established as a hospital within a hospital at University Hospital, signaling change for the transport service. Some of those changes included the expansion of services in 1997 to include children up to the age of 18. This change was also a result of referral
“We’ve come a long way from our first transport unit. When the NICU first started, we basically had a car and a mobile incubator that plugged into the car’s cigarette lighter. We did the very best job we could with what we had back then.”

*Elizabeth James, MD, Professor emeritus of child health*

physicians requesting transport of pediatric patients who were sick but not sick enough to fly. Then in 1999, Columbia Regional Hospital joined University of Missouri Health Care. Three years later, in 2000, a generous donation by Nancy and William Laurie and daughter Paige of Columbia, Mo., allowed Children’s Hospital to purchase a special transport ambulance designed for neonates and children. And in 2003, birthing services, along with the newborn intensive care unit, moved from University Hospital to Columbia Regional Hospital where the transport service is stationed as well.

Today the service boasts a ten-minute response time upon activation.

“We’re essentially taking the PICU and NICU out to the field where the patient is,” Pardalos said.

The team members have made many connections with health care teams in rural areas throughout the state. The transport team hosts educational programs for staff members at referring hospitals to educate them about intubating patients and other measures that can lead to better services.

Looking back 35 years, James said she is proud of the team.

“It’s a great service,” James said. “It provides a rapid response time and safe, efficient transport of both neonates and older children. The people who direct the team and those who are a part of the team are first-class. They give the highest quality of patient care and are responsible for the survival of many children in Missouri.”

*Story by Velvet Hasner*
University of Missouri Health Care’s decision to move Children’s Hospital to Columbia Regional Hospital means all pediatric inpatient and specialty services will be consolidated under one roof. The move is scheduled for completion in spring 2010.

“For years, our children’s services have been offered at several locations, including University Hospital and Columbia Regional Hospital,” said Harold Williamson, MD, interim vice chancellor for health affairs. “Now, with this decision, we can provide care for newborns, toddlers, children and adolescents all in one location.”

The decision was announced at a press conference on Oct. 10, 2008. The new leader of Children’s Hospital was also named at the event. In January 2009, Timothy Fete, MD, began his duties as medical director of Children’s Hospital, chair of the Department of Child Health and Children’s Miracle Network Professor in Pediatrics at the University of Missouri School of Medicine. Fete formerly served as vice chair and a professor of pediatrics at Saint Louis University School of Medicine. Fete succeeds Ted Groshong, MD, who is retiring from his leadership role after five years as chair of MU’s Department of Child Health and medical director of Children’s Hospital. Groshong, who joined the child health faculty in 1971, will remain a pediatric nephrologist and associate dean for alumni affairs at MU’s School of Medicine.

“Centralizing Children’s Hospital services will benefit patients and their families,” Groshong said. “This move to Columbia Regional Hospital will provide our patients and their families with a newly updated, kid-friendly environment, one-stop children’s services, 100 percent private patient rooms and convenient access via Highways 63 and Interstate 70.”

Children’s Hospital currently serves as a “virtual” hospital, with services offered at a number of locations. The pediatric intensive care unit and adolescent intensive care units are housed on the sixth and seventh floors of University Hospital. The neonatal intensive care unit is based at Columbia Regional Hospital. Outpatient units are located at University Physicians Medical Building and University Physicians-Green Meadows clinic.

Children’s Hospital’s pediatric and adolescent inpatient units will be located on Columbia Regional Hospital’s fifth floor, with approximately 40 patient rooms. The single-patient rooms will offer more privacy and space for patients and their visitors, allowing parents to conveniently stay overnight and comfort their children.

Children’s Hospital services that will be moved from University Hospital to Columbia Regional Hospital will include a pediatric intensive care unit, a general pediatric care unit, an adolescent care unit, a pediatric short-stay center and day of surgery admissions unit, and a pediatric blood disorders and cancer specialty outpatient unit. That first phase of the Children’s Hospital move is planned to be completed in spring 2010.

After the initial relocation of pediatric inpatient services, a second phase will relocate pediatric specialty clinics to the Columbia Regional Hospital campus. When the relocation is completed, only pediatric burn and trauma care will remain at University Hospital’s George David Peak Memorial Burn and Wound Care Center. More than 100 Children’s Hospital staff members and 130 MU School of Medicine Department of Child Health faculty, fellows, residents, staff will call Columbia Regional Hospital home.

The location of the hospital, near the intersection of U.S. Highway 63 and Interstate 70, allows the health care professionals at Children’s Hospital to further their mission of providing high-quality care to children from...
mid-Missouri and beyond.

“We take care of children from every county in the state of Missouri, and we’re proud to do so,” said Jim Ross, chief executive officer of University of Missouri Health Care.

“Our new location at Columbia Regional Hospital will offer families convenient access to many more related services for women and children, such as the Family Birth Center, Missouri OB-GYN Associates, the Thompson Center for Autism and Neurodevelopmental Disorders, the Missouri Center for Maternal Fetal Medicine and Ultrasound and our Center for Reproductive Medicine and Fertility,” Ross said. “Having women’s and children’s services at one hospital will create a synergy that will benefit all these patients.”

Get involved

To join one of the Children’s Hospital move planning teams, please contact Marjorie Matzes-Theis, MHA, administrative fellow, at matzesm@health.missouri.edu.

- Facilities team, led by Clarissa Easton, chief facilities officer for University of Missouri Health Care
- Nursing team, led by Sue Rodgers, RN, director of nursing services at CRH; Cindy Brooks, RN, manager of pediatric services; and John Hornick, RN, director of nursing services
- PICU team, led by Sheila Langlotz, RN, assistant manager of pediatric services; and Patricia Wankum, MD, assistant professor of child health and director of the PICU
- Trauma team, led by Matt Waterman, emergency service manager, and Steve Barnes, MD, associate professor and vice chief of general surgery
- Ancillary services team, led by David Parker, director of professional services; and Doug Anthony, MD, PhD, professor and chair of the Department of Pathology and Anatomical Sciences
- Support services team, led by Jim Steele, MBA, MHA, director of support services
- ITS/EMR team, led by Adele Coleman, manager of ITS user services; Mike LeFevre, MD, family and community medicine physician, interim associate chair of family and community medicine and chief medical information officer; and Mark Bollinger, ITS systems manager
- Medical records and registration team, led by Kay Davis, director of patient financial services
- Surgical and anesthesia services team, led by Mark Jackson, director of surgery services; Ven Ramachandran, MD, associate professor of surgery; Daniel Hoernschemeyer, MD, assistant professor of orthopaedic surgery; Joel Johnson, MD, PhD, Russell D. and Mary B. Shelden Missouri Chair in Anesthesiology; and Mary Kussman, MD, assistant professor of anesthesia and perioperative medicine
- Clinics team, led by David Mountjoy, associate director of practice management; and Herb Stanley, interim executive director of University Physicians
- ER/transportation team, led by Brenda Jensen, RN, manager of emergency center, dialysis transplant and IV access nursing; and Kathy Austin, MD, assistant professor of emergency medicine
- Adult ICU at CRH team, led by Bill Cotton, manager of Columbia Regional Hospital’s ICU and COU; and Jeremy Johnson, DO, assistant professor of internal medicine
- Residency issues team, led by Joy Drass, MD, assistant professor of child health

Learn more

For the latest planning news on the consolidation of Children’s Hospital at Columbia Regional Hospital, please visit http://www.muhealth.org/facultystaff/chmove.shtml. The Web site includes general information about the move, a schedule of master facility plan and construction update sessions, and an e-mail address for staff suggestions or questions.

Nursing student Molly Weber interacts with 20-month-old patient Peyton Schmidt of Jefferson City, Mo., during her clinical training at University Hospital’s pediatric unit, 7 East.

Story by Colin Planalp
Photography by Stephen Bybee
Volunteers and auxiliary members at Ellis Fischel Cancer Center use their individual talents in ways that collectively make a big difference in the lives of cancer patients and their loved ones.

"Typically our volunteers are retired professionals who have a tie to Ellis Fischel," said Kay Steward, a certified administrator of volunteer services and the manager of guest relations, volunteer and auxiliary services for University of Missouri Health Care. "Most volunteers have a link to cancer — either a family member or they have experienced cancer — and they want to give back," Steward said.

Sandy Taylor, an Ellis Fischel volunteer and auxiliary member, is undergoing treatment for her second cancer diagnosis. She was first diagnosed with breast cancer in 1997, successfully completed treatments and lived cancer-free until a recurrence 10 years later.

"At best, it’s scary to have cancer," Taylor said. "But I couldn’t ask for better doctors than Dr. Michael Perry and Dr. Steven Westgate. They make it at least bearable. There are very supportive people at Ellis Fischel."

Showing support and expressing empathy for patients is a service that volunteers provide in addition to their assigned duties. More than 80 volunteers serve at Ellis Fischel, with at least 10 volunteers serving at the cancer center at one time. Volunteers are assigned to departments depending on department needs and the skills of the volunteers. Taylor’s computer aptitude, for example, comes in handy for recording volunteer hours and organizing mailings for the auxiliary.

At the information desk, volunteers answer questions and give directions. Volunteers in the Ambulatory Infusion Unit deliver lunches and snacks as well as visit with patients who are in the unit for several hours while receiving chemotherapy treatments. Clerical duties of volunteers include filing, calling patients with appointment reminders, mailing appointment reminder cards and compiling patient packets for Cancer Screening Services, the lymphedema program and Registration.

"They help to get work done that would be hard to get done with the staff we have," said Debra Deeken, RN, OCN, manager of the cancer screening and breast health programs at Ellis Fischel. "Volunteers make our unit more efficient and effective. They enhance the
Volunteers also staff the Ernest and Eugenia Wyatt Guest House and Four Seasons gift shop at Ellis Fischel.

“The gift shop seems to be a place where listening is especially important,” said Edlyn Donovan, supervisor of Ellis Fischel’s auxiliary, volunteers and gift shop. “It is a place a patient or loved one can come where it is not medical, where they can collect their thoughts. The patients can talk to a volunteer who will not judge or give advice. Sometimes that’s what they need, just someone to be a friend and listen.”

Proceeds from the gift shop go to the Ellis Fischel Auxiliary. The approximately 100 members in the auxiliary strive to raise funds for patient programs and provide items to patients. Members may put together oral rinse or bath soak packets for radiation patients with dry skin, bake cookies for memorial services or sew items for patients. Each week a handful of auxiliary members meet in the sewing room at Ellis Fischel to create turbans for patients who have lost their hair, round pillows for mastectomy patients to place on their chests and under their seat belts, lap quilts for patients to keep their legs warm and pouches for patients who require a port and drain. A pouch will hold the drain and disguise it so that patients feel more comfortable going into public places or shopping.

Bonnie Fay, a volunteer and auxiliary member, calls bingo at the guest house. The activity gives guests and family members a chance to socialize, have fun and win prizes such as caps, shirts, candles and knick knacks. Prizes are donated by volunteers and auxiliary members.

“They seem to thoroughly enjoy it and it gives me a warm feeling,” Fay said. “I might just have a few people, but we play bingo. We just have fun.”

“You wouldn’t believe how much it means to play bingo,” said patient Daisy Herndon of Neck City, Mo.

Nina Hiler, a volunteer and auxiliary member, remembers the days before the Wyatt guest house was built. Finding an affordable place to stay was a hardship for some patients and families who traveled long distances for cancer care. The fourth floor at Ellis Fischel was sometimes used for overnight stays. With the completion of the guest house in 2001, patients such as Herndon, who must travel more than 50 miles, have a convenient and comfortable home away from home. Patients and families can rest, eat a meal and share feelings with others who are having similar experiences in the fight against cancer.

“We’re really proud of the guest house,” Hiler said.

The auxiliary contributed funds to the guest house as well as the home’s gazebo. Members also donate items such as toiletries and paper goods.

The auxiliary members host routine fundraisers, which have become popular among Ellis Fischel staff and physicians. The chocolate-covered strawberry fundraiser on Valentine’s Day begins at 7:30 a.m. and runs while supplies last, usually ending within two hours. Silent cake auctions become competitive as employees bid against one another on baked goods. Single dishes have sometimes sold for as much as $50.

Proceeds from all auxiliary fundraisers and the gift shop support patient programs and services. Proceeds from 2007 were used to purchase compression sleeves for patients with lymphedema (a painful condition that causes swollen limbs), palliative care baskets, fabric and sewing supplies, and the book “Straight Talk About Breast Cancer: From Diagnosis to Recovery,” by Suzanne W. Braddock, MD, for each newly diagnosed breast cancer patient.

The time and talent contributed by volunteers and auxiliary members does not go unnoticed.

“They’re a really dedicated, caring group,” Donovan said. “They make a lot of bonds and friends with patients, families and staff.”

To learn more or if you are interested in becoming a volunteer or auxiliary member at Ellis Fischel, please call the cancer center at (573) 882-2100.
As Deneal Sullivan, RN, marches through hallways and staircases on a Friday evening, talking with staff and examining her surroundings, she is on a mission to learn what is happening in every corner of University Hospital. Her job as a house manager requires her to have an in-depth knowledge of the hospital’s ever-changing environment.

“Being a house manager is kind of like playing chess,” Sullivan said.

Like a chess player, a house manager must keep the whole scene in perspective — how many patients are in the hospital, how many staff members are available and where beds are open — and also be prepared for any challenge thrown at the hospital — a 15-inch snowstorm or multiple trauma patients from an accident on Interstate 70.

“We are not expected to have all the answers, but we are the go-to people because we must know how to get the answers,” said Jean Howell, RN, manager of the Staffing Support Services Department, which includes University Hospital’s six house managers.

Columbia Regional Hospital has four full-time house managers and approximately five part-time house managers. Paula Edwards, RN, manager of nursing support services, oversees the house managers at CRH. Missouri Rehabilitation Center, in Mount Vernon, has two regular house managers and several other staff members who fill in when needed. The house managers are overseen by Angela Williams, RN, director of nursing at Missouri Rehabilitation Center.

House managers shoulder a variety of responsibilities. During regular business hours Monday through Friday, they work with unit supervisors and the staffing office to ensure the hospital has adequate staffing to care for patients, attend incoming Class I and II traumas, assign patients to beds in the proper units, respond to all emergencies related to buildings, patients, visitors and staff, and perform numerous other duties.

At Columbia Regional Hospital, house managers transport patients from intensive care units and step-down units to appointments and assist staff with caring for patients, including starting difficult IVs and helping staff on a busy floor, said Paul Carnes, RN, a house manager at CRH. As an experienced nurse, with 22 years of service at CRH and 10 years’ experience as a house manager, he enjoys helping people and serving as a mentor.

“If staff are having difficulty, we can go assist them in caring for the patients,” he said. “People look up to the house manager as a role model and want to discuss issues with them.”

During evenings and weekends, house managers handle all their daytime responsibilities, plus they become the most senior administrators in the hospital — charged with the well-being of the hospital and those inside it.

“The vast majority of the time our hospital is open is during non-business hours,” Howell said. “University Hospital cares for patients 24 hours a day, every day of the year, so house managers are often the people taking care of this place and everyone in it.”

“You are kind of the captain of the ship. You need to have that big picture mentality to keep it on course.”

John McNeely, RN, house manager
One of the first tasks a University Hospital house manager tackles each shift is making certain there is adequate staffing to care for patients. Several times a day, house managers and employees in the staffing support services office calculate the approximate number of staff needed to care for patients.

After that, nurse supervisors from each of the hospital’s patient floors gather around a table in the house managers’ office. They discuss how many patients each floor has, their patients’ acuity of illness and the number of nurses and nurse aides available.

The house manager uses that information to evaluate which floors are adequately staffed and which may need more help to care for patients. If needed, the house manager can shift staff from one floor to another or call in additional staff to help.

Tonight, after Sullivan tends to staffing, she heads out to make rounds throughout the hospital. She stops at each unit to talk with nurses, unit clerks and other staff, gaining a sense for each floor, including which are busy and which have beds for additional patients who may be admitted during the night.

Being on the move is one of the best aspects of the job, Carnes said.

“I like the mobility part of it, to go from area to area and see different parts of the hospital,” he said. “And no two days are the same. There is always something new.”

Rounding is important because, in addition to providing house managers the information they need to keep the hospital running smoothly, it offers them an opportunity to get to know staff from every area — patient-care staff, such as nurses and respiratory therapists, and support staff, such as housekeepers and security officers.

“Our goal is to round at least once every eight hours on each unit,” Sullivan said.

The better house managers know the staff, the easier it is to get things done — they know who to call if a water pipe cracks or the Emergency Department needs another nurse at 3 a.m.

“After you work these shifts for a while, these people get to be like your family,” Sullivan said.

In addition to having excellent interpersonal skills, composure under stress and talents for leadership and collaboration, house managers are all experienced nurses. They each have at least a bachelor’s degree in nursing and years of nursing experience, plus six weeks of house-manager training, during which they learn the responsibilities of a house manager and serve alongside an experienced house manager.

On his final day of orientation, John McNeely, RN, who began as a house manager in summer 2008, said he has learned that while there are many details to keep in mind, a house manager must always focus on the entire hospital.

“You are kind of the captain of the ship,” McNeely said. “You need to have that big picture mentality to keep it on course.”

Story by Colin Planalp
Photography by Stephen Bybee
Elizabeth Gunier, RN, the sickle cell nurse coordinator for the University of Missouri, develops close relationships with her patients and their families, teaching them how to best manage sickle cell disease. Because sickle cell disease is diagnosed at newborn screenings, her first contact with a patient often includes the baby’s distressed parents.

“They’re overwhelmed — they’re receiving lots of information,” Gunier said. “They’re scared, nervous and just had a baby. They have a child with a medical condition that they may have never heard of, and one that will last throughout the child’s life.

“The main complaint is pain,” Gunier said. “Remember that pain is subjective. If you ever encounter a patient with pain, treat the patient for pain. Sickle cell patients have had pain all their lives, since being a baby. It must be awful to live with pain on a daily basis like they do.”

Sickle cell disease is a chronic disease that can cause complications throughout a patient’s life. In addition to severe pain, patients can suffer tissue damage, acute chest syndrome, stroke, anemia, jaundice and damage to the spleen, kidneys, liver and brain. Sickle cell disease is an inherited blood disorder that affects red blood cells. More than 80,000 Americans have sickle cell disease. Approximately one in 12 African-Americans and one in 100 Hispanic-Americans has the sickle cell trait.

In people with sickle cell disease, abnormal hemoglobin molecules stick to one another...
and form long, rod-like structures. These structures cause red blood cells to become stiff and assume a sickle shape. Sickle-shaped cells pile up, causing blockages and damaging vital organs and tissue.

“Education is the most important part of my job,” Gunier said. “The more parents know or the child knows, the better able they are to handle and deal with sickle cell disease. When you have the kind of pain they have on a daily basis, you have to learn to deal with it at a young age.”

Sickle cell patients require vigilant care — patients must take folic acid daily and penicillin twice daily until the age of five. Gunier teaches parents how to feel for their child’s spleen. If the spleen suddenly enlarges, it is a serious and potentially life-threatening problem that requires immediate medical attention. Parents also learn how to treat pain crises and when to seek care for their children.

In addition to educating patients and families, Gunier also visits the schools of patients to educate school staff. She helps to develop individual education plans for children who must miss a lot of school.

Gunier’s greatest joys are getting to know patients, seeing them grow up and helping them feel better. Sickle cell disease can decrease a person’s quality of life, limiting the ability to travel, hold a steady job and attend college. Such has been the case with Roishonda Lovelady. At the age of 23, she has survived a stroke caused by sickle cell complications and endured excruciating pain episodes. In a 12-month span, she was hospitalized 13 times.

Several Children’s Hospital patients with similar situations have experienced positive results from a procedure known as an exchange transfusion. Gunier compares the procedure to an oil change. A patient’s sickle cell blood is removed and replaced with healthy blood. University of Missouri Health Care works closely with the American Red Cross, which receives closely matched blood donations through the Charles Drew Community Blood Donation Campaign. The program is named in memory of Charles Drew, MD, an African-American blood specialist, surgeon, educator and scientist who laid the foundation for modern blood banking.

In March 2008, Lovelady became the first adult patient at University Hospital to undergo an exchange transfusion. Within the first six months of exchange transfusions, Lovelady has been hospitalized less and feels better. She is anxious to attend college, work, travel, feel better while caring for her two-year-old daughter, D’shonda, and simply have a “normal life.”

“I want to become a nurse practitioner so I can help patients with blood disorders,” she said. “I really like Liz. She understands a lot. She does a lot to help me manage my sickle cell disease.”

Gunier admires her patients, and plans to continue serving as a sickle cell nurse, advocating compassionate care for sickle cell patients and education for patients, their families and other staff members.

Patients with sickle cell disease require a comprehensive, multidisciplinary program. Children are treated by a team of health care professionals led by Barbara Gruner, MD, who specializes in sickle cell disease at the Children’s Blood Disorders and Cancer Unit at Children’s Hospital. Adults are treated by a multidisciplinary team led by Carl Freter, MD, PhD, director of the Division of Hematology and Oncology, and Nellie B. Smith Chair of Oncology at Ellis Fischel Cancer Center. University of Missouri Health Care also offers a hemoglobin resource center in Columbia and an outreach clinic in Sikeston, Mo.

Story by Velvet Hasner
Photography by Stephen Bybee
Employees captured images of their travels, home life, pets and more in submissions to the 2008 Staff Photo Contest sponsored by Art in Health Care. The top 40 photographs were chosen by a panel of judges and displayed for employee voting in June at Columbia Regional Hospital, Ellis Fischel Cancer Center, Quarterdeck and University Hospital as well as online. Approximately 1,000 employees cast their votes for their favorite photographs in each of eight categories.

Winners were presented with framed prints of their winning photographs at a reception in August. Since September, the pictures have been displayed in University of Missouri Health Care facilities and will be rotated quarterly. Included here are the first-place photographs. To view more entries in the 2008 Staff Photo Contest, please visit the Art in Health Care Web site at www.muhealth.org/artinhealthcare/photocontest.shtml.

**Flowers**
“Kubiak’s Orchids”
Tonya Hilderbrand, administrative assistant

**Seasonal**
Untitled
Guy Carter, MD

**Travel**
“Serene Calm — Lake Geneve, Switzerland”
Smrita Dorairajan, MD, post-doctoral fellow in the Division of Nephrology
Animals  “In the Leaves”  Elisa Day, administrative assistant

University of Missouri  “Annie Oakley”  Diane Bernard, business technology analyst

People  Untitled  Guy Carter, MD, pediatric cardiologist

Landscape  “Fiery Gizzard, Tenn.”  Andrew Resnik, MD, psychiatrist

Still life  “Eye on the Storm,”  Laura Mackey, administrative assistant
Keeping patients safe
National goals help hospitals improve care

Susan Asher, RN, unit educator, believes that exceptional health care professionals continue to learn throughout their careers. They learn from their coworkers. They learn from their patients. They learn from clinical experience.

Even as a 28-year veteran of the Children’s Hospital neonatal intensive care unit (NICU), Asher still learns new things — sometimes from others’ experiences, such as the lessons provided by the Joint Commission’s national patient safety goals. In her job as a unit educator, Asher teaches colleagues about patient safety goals, including what the goals are, why the goals are important and how clinicians in the NICU meet the goals each day.

“People, from time to time, need to be reminded that we are doing a lot of things to keep our patients safe,” Asher said.

The national patient safety goals are a set of objectives established by the national hospital accreditation organization, the Joint Commission. In 2003, the commission introduced its first set of goals as a guide to improve the safety of health care throughout the United States. Goals are established each year based on intensive studies of preventable cases of patient harm in health care worldwide. The Joint Commission reviews the medical errors and evaluates areas where future harm can be prevented by setting national patient safety goals.

“The Joint Commission tries to let the rest of the health care community learn from someone else’s mistake,” said Carey Smith, MBA, manager of regulatory affairs at University of Missouri Health Care. “In 2009, for example, we have a new national patient safety goal related to anti-coagulation therapy.”

He explained that in reviewing news reports and records of medical errors nationwide, the Joint Commission found that anti-coagulation therapy, specifically in the use of heparin and Coumadin, was an area in which health care organizations as a whole needed to improve.

“People should view the goals not only as accreditation standards but also as safety standards,” Smith said. “That gives us a much safer environment for patients and staff.”

Knowing and applying national patient safety goals is the responsibility of everyone who works in health care, from nurses and physicians to food service workers and patient service representa-

Win movie tickets! Patient safety cryptogram

This cryptogram is a sentence used in this article. Each letter has been substituted for another. Letter substitutions are applied consistently throughout this puzzle. A letter may not stand for itself. Can you decode this cryptogram? A few letters are given to get you started.


E-mail the answer to hasnerv@health.missouri.edu by Feb. 28, 2009, for a chance to win a set of movie tickets. Winners will be announced in the next issue of Archives.
The University of Missouri has completed Phase I of its project to extend Virginia Avenue south past Hospital Drive. The finished section of road extends south through the CG-1 employee parking lot, providing additional entrances to the lot and alleviating congestion.

Phase II of the Virginia Avenue extension project will extend the road west between the new Parking Structure No. 7 and the Missouri Orthopaedic Institute building site, intersecting Monk Drive. The road construction project is scheduled to be completed in June 2009. When completed, it will provide additional access to the parking structure.

The shell of Parking Structure No. 7 is complete. Work continues on the parking structure as crews pour concrete for driving surfaces and complete other work, such as installing elevators, windows, electrical wiring, lighting, floor drains and entrance drives.

The parking structure is scheduled to be completed and ready for occupancy in summer 2009. When finished, it will house more than 2,000 parking spaces for employees, patients, visitors and students. The Parking and Transportation Services Department will contact University of Missouri Health Care employees with permits to park in the vicinity of University Hospital. Employees will be contacted and asked if they want to park in Parking Structure No. 7 in the following order:

1. Employees with permits to park in Virginia Avenue Garage
2. Employees with permits to park in Maryland Avenue Garage (MaG)
3. Employees on the waiting list to park in MaG will be asked if they want to park in MaG, depending on availability, or if they want to park in Parking Structure No. 7.
4. Employees with permits to park in WG-1 parking lot
5. Employees with permits to park in CG-1 parking lot
6. Employees with permits to park in SG-9 parking lot will be asked if they want to park in CG-1 or Parking Structure No. 7, if space is available.

The monthly parking fee is $18 for surface lots and $21 for parking garages. Parking Structure No. 7 will not be restricted to certain employees or have a waiting list.

Story by Colin Planalp
Photography by Stephen Bybee
Don’t play the odds

A woman's chance of getting breast cancer is one in eight. The earlier breast cancer is found, the greater the chance of surviving this disease. Below, Kristy Olson, a mammography technologist, performs a mammogram screening at Ellis Fischel Cancer Center.

Screening recommendations

**Age 20 to 39:**
- clinical breast exam every three years
- self breast exam once a month

**Age 40 +:**
- mammogram every year
- clinical breast exam every year
- self breast exam once a month

Women with a family history of breast cancer or other increased risk should discuss their screening options with their physician. To schedule a mammogram, please call Ellis Fischel's Cancer Screening Services at (573) 882-8511. Learn more about breast cancer, ways to decrease your risk and cancer screening guidelines at www.ellisfischel.org.

Take the chill off

Keep your family warm and toasty with this zesty taco chili recipe, ideal for simmering in a slow cooker. This recipe is featured in the Clubhouse section of the Coventry WellBeing Web site. In partnership with University of Missouri Health Care, Coventry Health Care offers a WellBeing ePhit program to employees enrolled in the health system's Choice Health Care plan. For more recipes or to enroll in the WellBeing ePhit program, please visit www.ummedcvty.com.

Zesty Taco Chili

1½ to 2 lbs. lean ground beef
1 medium onion, chopped
1 pkg. (1.25 oz.) taco seasoning mix
2 cans (14.5 oz. each) tomatoes, diced
1 can (10 oz.) diced tomatoes with green chilies
1 can (16 oz.) pinto beans, rinsed and drained
1 can (15 oz.) chili beans in sauce
1 cup frozen whole kernel corn
Mozzarella, Monterey Jack or cheddar cheese, shredded
Tortilla chips, slightly crushed

In a large skillet, brown ground beef and onion, one-half at a time, until meat is browned and onion is tender. Drain off fat. Transfer to a 5-quart crock pot. Stir in dry taco seasoning mix, diced tomatoes, diced tomatoes with green chilies, pinto beans, chili beans in sauce and corn. Cover; cook on low for 8 to 10 hours or on high for 4 to 5 hours. Sprinkle each serving with some cheese and chips. Makes 8 servings.

Calendar of events

**Feb. 19** Tango dance lesson for $2, noon to 1 p.m. in the Mark Twain Ballroom at MU’s Memorial Union

**Feb. 21** Dr. Hugh Stephenson Heart Ball, 6 p.m. at the Holiday Inn Select Executive Center in Columbia. Please call (573) 446-3000 for information.

**Feb. 25** Fit for Life employee exercise orientation, 3 p.m. at University Hospital, Room GL-20

**March 3** Fit for Life employee exercise orientation, noon at University Hospital, Room GL-20

**March 5** Salsa dance lesson for $2, noon to 1 p.m. in the Mark Twain Ballroom at MU’s Memorial Union

**March 6** “Work Schedules” occupational stress workshop hosted by the University of Missouri Employee Assistance Program, noon to 1 p.m. at University Hospital, Room CE505. Please call (573) 882-6701 to register.

**March 8-10** 29th Annual Dialysis Conference at the George R. Brown Convention Center in Houston. Learn more at http://som.missouri.edu/Dialysis.

**March 11** Construction information forum, 2 to 3 p.m. at Acuff Auditorium, MA217

**March 19** Tango dance lesson for $2, noon to 1 p.m. in the Mark Twain Ballroom at MU’s Memorial Union

**March 23-27** MU Spring Break

**March 25** Fit for Life employee exercise orientation, 3 p.m. at University Hospital, Room GL-20

**April 7** Fit for Life employee exercise orientation, 12 p.m. at University Hospital, Room GL-20

**April 8** Construction information forum, 2 to 3 p.m. at Acuff Auditorium, MA217

**April 16** Tango dance lesson for $2, noon to 1 p.m. in the Mark Twain Ballroom at MU’s Memorial Union

**April 20-24** Art in Health Care Week

**April 30** Employee talent show, 6 to 8 p.m. in Bryant Auditorium, M105

To view the University of Missouri Health Care calendar of events, please visit http://www.muhealth.org/calendar.
A new beat
Retired police chief tackles hospital security

Mid-Missouri native Randy Boehm, manager of security and parking services at University of Missouri Health Care, is passionate about serving his community. Born in Jefferson City and raised in Boonville, he moved to Columbia in 1976 and joined the Columbia Police Department.

After serving as a Columbia police officer for 31 years and as Columbia’s chief of police for eight years, Boehm joined University of Missouri Health Care in July 2008.

“It’s obviously been a big change for me to be in a new environment after being a police officer for 31 years, but it’s very enjoyable to be in this new environment,” he said. “I have met a lot of very nice people here who have gone out of their way to be helpful.”

Boehm sees his job as a new challenge and opportunity. He believes that while serving as a security officer is different than serving as a police officer, there are important similarities. He encourages in his staff at University of Missouri Health Care the same values he learned as a police officer: integrity, respect and partnership.

“Those values signify what I think is important both in my personal life and my professional life,” he said. “Integrity is No. 1. I pride myself on being honest and having a reputation of that. I always think you get more accomplished when you show respect to people. The partnership aspect is really about being part of the community.”

To be a partner in his community, Boehm volunteers with a variety of organizations, including KidsFirst Optimist Club, a fundraising group that benefits children’s programs such as the Big Brothers and Big Sisters mentorship organization. He has also volunteered with the Special Olympics for 20 years. He currently serves on the board of directors, and he assists with events each year.

“I enjoy very much doing things for the athletes,” Boehm said. “They are a wonderful group of people. It’s very rewarding to me personally.”

Boehm said the athletes show him how perseverance can overcome obstacles, and how important it is to approach every challenge — personal or professional — with gusto.

“I give this job the same commitment and energy that I give to everything I do,” he said.

As manager of security and parking services, Boehm heads a department of 27 staff members. The department oversees security and parking services for all Columbia-area facilities, including Columbia Regional Hospital, Ellis Fischel Cancer Center, University Hospital and University Physicians’ clinics.

“Our mission is to do our part in providing a safe environment not only for our patients and visitors but for all of our employees,” he said. “I have been very impressed with the quality of our staff and their ability to get things done.”

Randy Boehm at a glance …
Family: Wife Vee, a human resources specialist for the City of Columbia; son Josh, 25, a firefighter
Hobbies: Working out and watching Mizzou Tiger baseball, basketball and football, the Kansas City Chiefs and the St. Louis Cardinals
Favorite food: Barbecue
Favorite reading: Newspapers, Sports Illustrated, leadership books and professional journals
People are sometimes surprised to learn: I used to sing for weddings, and I still occasionally sing for weddings or special events.

Story by Colin Planalp
Photography by Stephen Bybee
Steve Patterson, executive director of Missouri Rehabilitation Center, congratulates Diana Moore, a rehabilitation aide, on her 20-year work anniversary at MRC. Photo courtesy of Missouri Rehabilitation Center

Employees recognized for 20-, 15- and 10-year work anniversaries at MRC in 2008 include:

20 years of service
Diana Moore, Occupational Therapy
Lorrene Shorney, Medical Records

15 years of service
Steve Burks, Cardiopulmonary Services
Linda England, Nursing Services
Daisy Garner, Housekeeping
Mary Hall, Nursing Services
Kevin O’Neal, Social Services
Judith Peavey, Speech Therapy
Geraldine Tennis, Labs
Gail Winfelfd, Clinic Physicians

10 Years of Service
Emery Brafford, Human Resources
Fay Bryant, Dietary Services
Patti Charles, Respiratory Therapy
Kimberly Cobb, Nursing Services
Jenny Force, Respiratory Therapy
Gail Getzendaner, Nursing Services
Kela Gilliland, Dietary Services
Marcia Goodman, Nursing Services
Penny Hamilton, Speech Therapy
Belinda Hartless, Respiratory Therapy
Debbie Jennings, Labs
Linda Konstanzer, Quality and Risk Management
Janice Marquier, Nursing Services
Charity Shelton, Occupational Therapy
Vivian Stephens, Accounting
Greg Thompson, Plant Engineering Maintenance
Patty Thompson, Nursing Services
Teresa Wallace, Human Resources
Loretta Wood, Nursing Services

Mike Cooper, radio host from 94.3 FM, KAT Country, interviewed 10-year-old Karlee Vinson of Belle, Mo. The Children’s Miracle Network raised approximately $222,000 to support Children’s Hospital during the Miracle for Kids Radiothon Sept. 24 to Sept. 26.

Christina Vollrath, RN, manager of the Medical and Neurosurgical Intensive Care Unit, and Jo Leisman, RN, manager of the Surgical Intensive Care Unit, discuss pledges at the radiothon phone bank. Volunteers staffed 15 phones for three days, taking approximately 900 calls.

The Nebraska Theatre Caravan Christmas carolers brought holiday cheer to Children’s Hospital Dec. 4. The group also performed in University Hospital’s main lobby.
Art in Health Care Spirit Day

University of Missouri Health Care’s Art in Health Care program hosted Mizzou Spirit Day on Oct. 30. The event featured art, refreshments, and a spirit rally with Mike Alden, MU athletic director, members of the Marching Mizzou band, MU cheerleaders and the MU mascot, Truman. As part of the event, Nutrition and Food Services staff members were recognized by Coach Gary Pinkel for their overall giving to the Central Missouri Food Bank through the United Way.

Employee wellness fair

Mary Freiburghaus, RN, APN, nurse practitioner, and Colleen Sheets, RN, diabetes clinic supervisor, conduct blood glucose screenings. The fair offered employee flu shots, health screenings and giveaway items.

Holiday gift drive

Student nurses provide information on body mass index measurement at the employee wellness fair on Oct. 23. Health screenings included cholesterol, blood pressure, blood glucose and height and weight.

ENT clinic open house

Morgan Hahn, audiologist, administers a hearing test at the grand opening for the ENT and Allergy Center of Missouri and Columbia Facial Plastic Surgery on Oct. 29. The clinics are located at 812 Keene St. in Columbia, near Columbia Regional Hospital.
“Communication between doctors and appointments is remarkable. My husband and I drive several hours to Columbia. Ellis Fischel is wonderful about scheduling X-rays and doctor’s visits all on the same day.”

Wilburn Turner, West Plains, Mo.

ELLIS FISCHEL CANCER CENTER

“Ellis Fischel Cancer Center has been a God-send. We travel three hours to get here. We live south of St. Louis. A nearby cancer center didn’t seem too interested, but here everyone is very caring, friendly and shows great concern. It has been 20 months since surgery and everyone here has not changed in their attitude; they are all still caring, understanding and concerned.

“Wyatt Guest House is also wonderful. Thank you all for everything.”

Thomas Gene Henson, Bonne Terre, Mo.

“What an amazing staff at Ellis! In April, I was diagnosed with malignant melanoma. Being only 22 years old, this was a very scary time in my life. It all happened very fast and I was worried about how certain aspects of my medical care were being handled locally.

“One of my friends, Sheila Luttrull, recommended I call Dr. Clay Anderson at Ellis Fischel for a second opinion. From the moment I began talking with Tammy Reeder, I felt a calming come over my body. Dr. Anderson had me fax all of my records to him and he reviewed all my pathology results; all of this was within hours of first talking to Tammy.

“Dr. Anderson recommended I meet with Dr. Paul Dale. What a blessing that turned out to be. Through a lot of long-distance talking, my family and I felt that driving four hours to see Dr. Dale was what we needed to do. We got to Ellis Fischel two hours early and everyone worked me right in. They scheduled my pre-op visit and surgery as close as possible so we wouldn’t have to travel as much. They scheduled everything to accommodate me.

“Dr. Dale’s staff — Jeanie, Jo, Janice and Cassie — were all so amazing. After my surgery, I could call any one of them and they took as long as I needed to talk and assisted me. I never felt like a burden. That meant so much to me.

“Dr. Dale is also very amazing. He took the time to sit and explain all my options. He was comforting to me and my family.

“I would also like to mention Therisa Dunn in admissions. She was so nice and helpful. She personally escorted me to wherever I needed to go. Also, Karen Wingert really made me feel a lot better about my recovery and things I could do to help get me back on track sooner.

“I believe God truly places people in our lives to help us along the way. Ellis has been my angel! Thank you for everything.”

Kelly Nothdurft, Jackson, Mo.

“Communication between doctors and appointments is remarkable. My husband and I drive several hours to Columbia. Ellis Fischel is wonderful about scheduling X-rays and doctor’s visits all on the same day.”

Wilburn Turner, West Plains, Mo.

UNIVERSITY HOSPITAL

Being a registered nurse myself, I understand the many challenges that nurses face each time they walk into the hospital. This week I’ve had the unique opportunity to be on the opposite side of things as I stayed with my sister (also a nurse) before her surgery to remove a brain tumor.

“During our time here, there were four nurses in particular who deserve special mention: Tom (night shift, Medical Neurosurgical Intensive Care Unit), Janice and Vonnie (day shift, 5 East), and Rhonda (night shift, 5 East). I would be proud to work alongside each of these great nurses. Thank you.”

Shelley Western, Kirksville, Mo.

“We could not have been more pleased with the treatment that my wife, C. Carolyn Jefferson, and I received at your facility. In particular, a registered nurse in the emergency room (I believe his name is Jon) stayed on long after his shift ended to be sure Carolyn received a room with no roommate, with a lounge chair provided so I would stay with her throughout the remainder of the night.

“Many people were most kind. In particular, I remember Dr. Colbert, who works with Dr. Baklanov, Dr. LeMaster, Nina, a registered nurse, and Wanda, a nurse technician.

“Additionally, I was able to get a wondrous grilled ham and cheddar sandwich with fries in the basement cafeteria, The Grille Downstairs.

“If one of us gets sick on the road again, I hope it is in Columbia!”

Thomas B. Jefferson, Carbondale, Ill.

“We are very impressed by the staff in your orthopedic clinic. We are truck drivers who needed some care with a follow-up and they were willing to oblige us. The bedside manner and knowledge of procedures is outstanding. They diagnosed from X-rays and postoperative notes from a previous doctor. Everyone was very friendly and inviting. The staff is both friendly and professional. Thank you.”

Aaron and Susan Price, Sanford, N.C.
When Tammy Hickman, LPn, supervisor of outpatient services, first began donating blood 25 years ago, she knew that she was helping save lives. Blood transfusions are required for patients with blood disorders, surgeries and traumas.

When her mother was diagnosed with leukemia, however, the importance of giving blood became less abstract. Hickman saw first-hand how donated blood could benefit a person.

“We take for granted that blood is available, but it was a life-and-death situation for her,” Hickman said. “She had to have transfusions.”

Since Hickman first began, she has donated blood approximately 80 times. She tries to donate as often as she is able, every 56 days. The American Red Cross blood drives hosted by University of Missouri Health Care make donating much simpler, she said.

Hickman appreciates that she can walk to Columbia Regional Hospital from the Thompson Center for Autism and Neurodevelopmental Disorders where she works and donate during lunch time, usually taking only 30 minutes.

“I love the fact that they have blood drives at the hospital,” she said. “When they are at the hospital, it is just really convenient.”

The drives serve as a reminder of when she is eligible to give blood, and save her a special trip to donate. In addition to Columbia Regional Hospital drives, drives are held regularly at Ellis Fischel Cancer Center, Quarterdeck and University Hospital.

Much of that blood comes back to University of Missouri Health Care to treat patients, such as car accident victims at University Hospital’s Frank L. Mitchell Jr. Trauma Center and cancer patients at Ellis Fischel.

The American Red Cross encourages anyone who is eligible to donate blood. All blood types are needed all of the time, for day-to-day health care and to handle emergencies such as natural disasters.

“When you donate, you are ensuring a safe and adequate blood supply,” said Rachel Talbott, donor recruitment representative for Missouri and Illinois Region of the American Red Cross.

The main criteria for eligibility, Talbott said, are that you feel well the day of donation, are 17 years old or 16 with parental consent and weigh 110 pounds or more.

“Once you meet those qualifications, you are a great candidate,” she said.

Blood drives at University of Missouri Health Care facilities are announced in the daily InSight employee newsletter. For more information about blood donation, please contact the Red Cross at (800) GIVE-LIFE (448-35433).

A dedicated donor
Why one nurse gives blood every chance she gets

*Top: Tammy Hickman, LPn, feels compelled to donate blood regularly.
Above: Hickman is photographed at home with her mother, Beth Young, her personal inspiration for donating.*

Story by Colin Planalp
Photography by Stephen Bybee
Heart Disease Doesn’t Care What You Wear

These Columbia community leaders choose to make a difference. They know one in five women has some form of cardiovascular disease, which mostly is preventable. Join these women in taking steps to lower your risk and know the symptoms of a heart attack.

This campaign is a red alert to take heart disease seriously. The heart-care specialists at University of Missouri Health Care urge you to talk to your doctor and get answers that may save your life. Visit www.muhealth.org and click on “heart truth” to learn about heart disease in women.

In honor of National Heart Month, The Strand Salon & Spa is offering a 20 percent discount on all hair-care products during February.