

# presence



*The New*

## TRAUMA EMERGENCY CENTER

*Construction and Expansion Signal a New Era in Saint Francis' History*

The Henry Zarrow

... **NICU** ...

Full Array of Lifesaving Services  
for Babies Right Here In

**TULSA**

**MIRACLE MILES**

A TINY NEWBORN'S

**BIG FIGHT**

TO SURVIVE

**A NEW PATHWAY  
TO HEART CARE**

Saint Francis is First in Tulsa to  
Offer Revolutionary Procedure for

**CHRONIC TOTAL  
OCCLUSION**

# Community Events



## MAY

### Children's Miracle Network Fundraiser

Associates and customers of Walmart and Sam's Club are making miracles happen. Donations made at the retailers' registers between May 1 – June 11 will support The Children's Hospital at Saint Francis, a **Children's Miracle Network (CMN)** Hospital. For more than 25 years, Walmart and Sam's Club have supported CMN hospitals across the country through this annual fundraising campaign.

*Learn more at [childrensmiraclenetworkhospitals.org](http://childrensmiraclenetworkhospitals.org).*

### The American Cancer Society Relay for Life

The **American Cancer Society Relay for Life** will be held in Tulsa on Friday, May 30. This overnight community fundraising event begins at 6 p.m. at Guthrie Green.

*For more information, visit [relayforlife.org](http://relayforlife.org).*

## JUNE

### Rib Crib "Pit Masters" Golf Invitational

**Rib Crib's 12th Annual "Pit Masters" Golf Invitational** is set for Monday, June 2 at the Golf Club of Oklahoma. Golfers will tee up to benefit The Children's Hospital at Saint Francis.

*For more information, visit [ribcribgolf.com](http://ribcribgolf.com).*

### Saint Francis Tulsa Tough

**Saint Francis Tulsa Tough** is a premier three-day cycling festival scheduled for June 6-8 in downtown Tulsa.

*Learn more and register at [tulsatough.com](http://tulsatough.com).*

### Camp STRONG

**Camp STRONG by Saint Francis Health System** is June 9-13 at Shepherd's Fold Ranch near Avant, OK. This camp is for cardiac and oncology patients ages 6-18. Campers may bring one sibling (as space allows) to share in the fun.

*Register online at <http://campstrong2014.eventbrite.com>.*

# presence

a publication of Saint Francis Health System

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## Letter from Jake Henry Jr., President and Chief Executive Officer

I am very pleased to introduce Saint Francis Health System's inaugural issue of *Presence*. And, in keeping with the health system's mission "to extend the presence and healing ministry of Christ in all we do," I believe the title of our new publication speaks volumes. That's because we not only strive to extend the presence of Christ in all we do, we also want to be "present" and play a vital role in the lives of our patients and fellow community members.

With each passing day, something new and exciting is happening at Saint Francis Health System and *Presence* will provide yet another way to share our stories with you. We hope you enjoy reading this issue, as well as future issues of *Presence*. This publication has been created to keep you—our friends, neighbors and fellow eastern Oklahoma residents—up-to-date on the latest news and stories occurring throughout the Saint Francis organization.

This year promises to be an especially significant one for the health system for a number of reasons. These include the implementation of Epic, a remarkable electronic health records system that will provide each patient with one record system-wide—and a new and expanded Trauma Emergency Center and bed tower that will further demonstrate Saint Francis' commitment to meeting the healthcare needs of eastern Oklahoma—today and well into the future.

This year also marks Saint Francis' 54th anniversary of serving the community. Many things have changed since Saint Francis Hospital first opened its doors in 1960; more importantly, many have not. Through the decades as medical technology has continued to evolve, the dedication of our physicians and staff members to the health and well-being of the people we serve has remained steady and consistent. We look forward to embracing the future and to continuing our proud legacy of being the premier healthcare provider in the region.

Best regards,

Jake Henry Jr.  
President and Chief Executive Officer, Saint Francis Health System







presence  
in pictures

### Hot Cocoa

Young entrepreneurs Jordyn Parnley and Claire Mayfield share their earnings with The Children's Hospital at Saint Francis. The girls sold refreshments in their Tulsa neighborhood during the fall, and raised enough money to buy Play-Doh, bubbles, craft supplies, books and more for young patients.







presence  
in pictures

### **Standing Ovation**

Armenda Cann celebrates 50 years of service during the Saint Francis Health System "All Employee Party" on November 16, 2013. Thousands of her co-workers leapt to their feet for a standing ovation in honor of her five decades with Saint Francis. Armenda is the second employee in the health system's 54-year history to reach such a milestone; Frank Hamilton was the first in 2010.







presence  
in pictures

### Super Squeegees

Young patients at The Children's Hospital at Saint Francis were happily surprised to see some favorite superheroes hanging around. The Incredible Hulk, Spider-Man and Batman (not pictured) scaled The Children's Hospital to fight grime—on windows, that is. Armed with super squeegees and buckets of suds, these window-washing heroes brought smiles to the faces of the young heroes on the other side of the glass.





# Why go {anywhere} else?

The Henry Zarrow NICU  
at The Children's Hospital at Saint Francis  
Provides a **Full Array of Lifesaving Services**



Neonatal services at The Children's Hospital at Saint Francis are provided by **neonatal nurse practitioners and six board-certified/board-eligible neonatologists who offer around-the-clock coverage seven days a week.**

When it comes to the health and well-being of our children, most of us would travel near and far. With the Henry Zarrow Neonatal Intensive Care Unit (NICU) at The Children's Hospital at Saint Francis right here in Tulsa, there's no reason to go anywhere else.

As the **only Level IV NICU in eastern Oklahoma**, the Henry Zarrow NICU provides specialized care and lifesaving services for babies as young as 24 weeks gestational age. Being a Level IV neonatal center also means our NICU specialists are highly qualified to provide sophisticated types of respiratory support, as well as a wide variety of neonatal surgeries for very sick babies.

Located on the fifth floor of The Children's Hospital at Saint Francis, the 30,000-square-foot neonatal unit is a full-service medical complex designed

exclusively to provide high level care for children and family comfort. The Henry Zarrow NICU has 58 beds, 38 of which are private rooms, six twin rooms and an eight-bed stabilization unit located near the Labor and Delivery area.

Neonatal services at The Children's Hospital at Saint Francis are provided by **neonatal nurse practitioners and six board-certified/board-eligible neonatologists who offer around-the-clock coverage seven days a week.**

**Specialized services available at the Henry Zarrow NICU include the following:**

**Extracorporeal membrane oxygenation (ECMO):**

An infrequently used, but highly necessary option of treatment, ECMO is a sophisticated heart/lung bypass system that can be a source of temporary life support for babies at least 34 weeks gestational age and weighing two kilos (4.4 pounds). The Children's Hospital at Saint Francis is one of only two programs offering ECMO in Oklahoma.

**Transport team:**

The specialized transport team works to stabilize critical infants at referral hospitals throughout eastern Oklahoma, then transports the young patients to the Henry Zarrow NICU.

**Outreach:**

Specially trained staff members provide classes to referring facilities on subjects such as neonatal resuscitation and delivery room stabilization procedures. Community outreach and support are also provided in the fields of obstetrics and maternal fetal medicine.

**Therapeutic hypothermia:**

This treatment offers an opportunity for critically compromised babies to increase their chance of survival by decreasing the demands on their bodies while their brains rest and respond to other interventions.

Therapeutic hypothermia requires a 72-hour treatment starting within six hours of a baby's birth and involves careful monitoring of multiple physiologic and hematological parameters in the adjunctive use of ultrasound and electroencephalogram (EEG) studies.

**Inpatient and outpatient lactation services:**

International Board Certified Lactation Consultants (IBCLC) provide education, support and care.

**Respiratory, physical and speech therapies:**

Ill or premature infants may receive one or more of these therapies while in the NICU. The type of care given by a respiratory therapist greatly depends on a baby's heart and lung function. Neonatal physical therapy is not rehabilitative—as it would be for older children or adults—rather, it trains

a baby's movements and developmental behaviors to prevent future problems and to offer comfort to the infant in a difficult environment. And, it may seem strange to provide speech therapy—after all, newborn babies can't talk. But, speech therapists also help infants with feeding issues because those issues are critical when you are caring for fragile newborns.

**Nutrition:**

Registered dietitians work with a patient's medical team to provide appropriate nutrition care.

**Multi-channel sleep studies:**

These studies assist in the diagnosis of obstructive and central sleep apnea.

**24-hour pH probes:**

This procedure helps diagnose gastroesophageal reflux disease or GERD.



"I'm just always amazed at the people I get to work with at The Children's Hospital at Saint Francis. I look at the oncologists and their level of training, and the pulmonologists and their level of training and on and on. It's such a luxury to work with all of these doctors and other specialists who have traveled here to Tulsa to provide children with the very best care."

Michael Chang, M.D.  
Pediatric Infectious Disease

"Our Maternal Fetal Medicine (high risk obstetrics) practice works very closely with the neonatologists and pediatric specialists at Saint Francis. When a baby has been identified as having a fetal birth defect, the Saint Francis team is put into action and preparations are made for the baby's delivery. We believe we can improve patient care and outcomes with this 'team concept.' The mother has regular visits with the specialists who will be providing care for her baby even before delivery. Our region and hospital system is fortunate to have this availability."

Stephen Jones, M.D.  
Obstetrician/Gynecologist, Maternal Fetal Medicine Specialist

"Nearly all health systems have a mission statement. At Saint Francis, the mission is comprised of the values of Christ. As doctors, nurses and staff, we all try to put these values into action in everything we do. Our mission is more than words on a page; it's a way of life, and it makes a big difference in the care patients receive."

Gregory Kirkpatrick, M.D.  
Pediatric Hematologist/Oncologist

## Full Gamut of Care

The Children's Hospital at Saint Francis holds fast to its mission of providing the most advanced technology and services to young patients and their families throughout the area.

The comprehensive array of pediatric specialties includes:

- |                                    |                                    |
|------------------------------------|------------------------------------|
| Allergy/immunology                 | Hospitalist medicine               |
| Cardiac surgery                    | Infectious disease                 |
| Cardiology                         | Neonatology                        |
| Child abuse pediatrics             | Neurology                          |
| Child and adolescent psychiatry    | Neurosurgery                       |
| Critical care medicine             | Ophthalmology                      |
| Dental surgery                     | Orthopedic surgery                 |
| Endocrinology/diabetes care        | Otolaryngology                     |
| Gastroenterology                   | Pathology                          |
| General inpatient care and surgery | Plastic and reconstructive surgery |
| Hematology/oncology                | Pulmonology                        |
|                                    | Urology                            |



## You Can Help Make a Difference in a Child's Life

The Children's Hospital Foundation at Saint Francis was first established in 2005 to foster charitable giving to The Children's Hospital at Saint Francis. Then, now, and well into the future, making sure kids receive the very best care is what keeps us inspired.

Did you know you, too, can help make a big difference in a child's health? From one-time donations, monthly or annual giving, to tributes and memorials, your gift will be used to ensure our young patients receive the care they deserve.

The future of any city depends on the health and well-being of its children, and their children and so on – for generations to come. By supporting The Children's Hospital Foundation at Saint Francis, you make the difference. We consider every donation a treasure that is guarded and carefully spent to further our special mission. To learn more or to give to the Foundation, please call 918-502-6761.

"Saint Francis has done a great job of not only building a beautiful facility especially for children, but also of providing an outstanding staff and state-of-the-art technology. Parents can rest assured The Children's Hospital at Saint Francis provides care needed for essentially any problem their newborn or child may encounter. There's simply few reasons why parents must transport their critically ill child 100, 200, 300 miles away from other family members and support systems. Having The Children's Hospital right here in Tulsa is a tremendous resource."

Raymond Sanders, M.D.  
Neonatologist

"One of the reasons our NICU is the absolute best in the region is the access patients have to a full complement of dedicated specialists and services. The child-friendly environment of our hospital, combined with the most skilled pediatric physicians and latest medical advancements, sets us apart."

Shannon Filosa, R.N., Ph.D.  
Executive Director of The Children's Hospital at Saint Francis

"The Henry Zarrow NICU is great for many reasons, namely the compassionate staff members from all disciplines—physicians, nurses, respiratory therapists, case managers and social workers—as well as the subspecialty physicians who are readily available to help with different diagnoses. We all care about our patients and their families and it's not uncommon for us to form lasting bonds with them. Our staff strives to stay current with best evidence-based practices and therapies. We are the only hospital in town that has a specialty high frequency ventilator—the Jet. Actually, we have three! We also have a great transport team with the philosophy that 'we bring the NICU to the baby, not just bring the baby to the NICU.'"

Cindy Colley  
Registered Respiratory Therapist (R.R.T.)-Neonatal Pediatric Specialist (N.P.S.), Children's Hospital Respiratory Supervisor



# Henry Zarrow NICU ...Team...

One needn't look far to understand what makes the Henry Zarrow NICU so special.

Hands down, it's the remarkable people who work there. That's because, everyone who spends their working lives in the Henry Zarrow NICU shares a commitment to providing the best possible care for newborns in desperate need of it.



## Specific information about some of the Henry Zarrow NICU's caring team members:

### Attending doctor (neonatologist):

The attending doctor is the main individual responsible for your baby's care. The attending doctor has completed a fellowship training in neonatology and residency training in pediatrics. The neonatologist is a pediatrician with special training in caring for babies who are sick and require intensive care after birth. Although there are many different people involved in a baby's care while in the NICU, it is the neonatologist who determines and coordinates the daily plan of care.

### Neonatal Nurse Practitioner:

This type of nurse has received special training in caring for babies in the NICU. Nurses play a very important role in

monitoring the baby and supporting and educating the family. Of all the caregivers in the NICU, nurses usually spend the most time at the baby's bedside caring for the baby, as well as for the family. A nurse might also be a member of the NICU transport team or become an extracorporeal membrane oxygenation (ECMO) specialist after special training.

### Maternal-Fetal Medicine Specialist:

A maternal-fetal medicine physician (perinatologist) is an obstetrician with special training in the care of high-risk pregnant women. This type of doctor can care for women who have premature labor, multiple gestations (twins or more), high blood pressure or diabetes.

### Pharmacist:

A pharmacist is a professional with education and training in the preparation of medications used in the NICU. Pharmacists help prepare medications including antibiotics, immunizations or intravenous (IV) solutions, such as total parenteral nutrition (TPN).

### Dietitian:

A dietitian or nutritionist is a professional who is educated and trained in nutrition. This includes human milk, vitamin and mineral supplements, and preterm infant formulas used in the NICU. Dietitians help monitor what babies are fed, how their bodies respond to the food and how they grow.

### Pediatric Surgeon:

A surgeon is a doctor with special training in the diagnosis and care of conditions that require surgery. A pediatric surgeon has more advanced training in surgery for children. Surgeons are asked to see babies in the NICU who may need surgery for birth defects or conditions that occur after birth, such as necrotizing enterocolitis (a gastrointestinal disease affecting mostly premature infants). Surgeons might also be asked to place central catheters in babies who need long-term intravenous fluids.

### Social Worker:

Social workers help families find and coordinate resources in the hospital and community to help meet their needs.

### Transport Team:

Specialized equipment and supplies help the Transport Team stabilize and transport critical infants from smaller hospitals to the Henry Zarrow NICU.

### Supporting Staff:

Caregivers from a myriad of other specialties, such as pediatric cardiology or pediatric surgery, may be part of the consultant team involved in caring for babies in the NICU.





**When Allison and Steven Terrill first learned they were expecting twin boys, the news came as a pleasant surprise.**

Yet, by week 15 of the pregnancy, joy turned into anxiety when doctors informed the Terrills one of their babies was much smaller than the other one. From that point forward, Allison's pregnancy was classified as high risk and checkups were scheduled every two weeks.



# Miracle Miles

*A Patient's Story*

At 18 weeks, the smaller baby was in a negative growth percentile, whereas his brother was in the 95th percentile. As the weeks passed, the doctors became increasingly doubtful the smaller baby would survive. "It was so hard never knowing from one day to the next whether or not I still had twins or if the little one had just slowly faded away," Allison says. But, fading away simply wasn't in the cards for this mighty little fellow.

During the 30th week of her pregnancy and after several days of labor pains, Allison's obstetrician, Yen Tran, M.D., performed a C-section. With an original due date of May 4, 2013, the twins entered this world on February 26. At birth, the larger boy (Henry) weighed 4.4 pounds; the smaller one (Miles, or "Miracle Miles," as he soon became known throughout the NICU) weighed only 1.4 pounds.

"In situations like this, I always try to prepare mom and dad for the 'worst case scenario,'" says Rachel Davis-Jackson, M.D., neonatologist and medical director of the Henry Zarrow NICU. "Throughout most of Allison's pregnancy, we didn't expect Miles to even survive being born; obviously, he had another idea in mind. From the very beginning, that tiny baby let us know he had a strong will to live. When he came out, he was crying, as well as having some respiratory distress. Yet, even though he was struggling, it was clear he was breathing on his own. He didn't need us to breathe for him; he just needed a little bit of support

to help his respiration. From that point on, Miles just kept getting better and better."

All told, "Miracle Miles" ended up spending 81 days in the NICU. Throughout his stay, the NICU's multi-disciplinary team of specialists provided 24/7 care as this amazing little baby gradually improved. "Seeing babies get better and the light in parents' eyes when they do, is what keeps me going. It's truly an inspiration," Dr. Davis-Jackson says.

Today, Miles is still small; yet, he continues his pattern of gradually getting bigger and stronger. After all, he didn't earn the name of "Miracle Miles" for nothing.

"There's no way I can adequately express how wonderful the Henry Zarrow NICU staff is. When our twins were there, everyone—from the doctors, nurses, respiratory specialists, to the social workers and lactation consultants—was there for us," Allison says. "We couldn't possibly be more impressed... or more grateful to this wonderful group of people. And, as an added bonus during our stay, we received a visit from Mr. Henry Zarrow himself. He thanked us for being there. I didn't know why he was thanking us; I felt it should be the other way around! He was a very special man...and we are all proud the NICU bears his name."





ON THE  
SAINT FRANCIS  
**HORIZON**

ON THE  
HORIZON



When it comes to quality healthcare, you can bet there is always something new on Saint Francis' horizon.

Two significant projects – the new **Trauma Emergency Center** and **Epic**, the industry's leading electronic health record, are well underway and enhancing healthcare throughout the area.

### New Trauma Emergency Center and Bed Tower Signal New Era in Saint Francis' History

Exciting plans are quickly becoming reality for Saint Francis Health System's new and expanded Trauma Emergency Center (TEC) and bed tower. Scheduled for completion this summer, the new TEC and tower will be located on the west side of the Saint Francis Hospital campus at 61st and Yale Avenue.

"Construction of the new TEC and bed tower signals a new time in Saint Francis' history," says Jake Henry Jr., president and chief executive officer, Saint Francis Health System. "It marks an important milestone in Saint Francis' quest to prepare and thrive within the new order of healthcare delivery now emerging. When complete, the tower, together with the system's plans to expand patient access through focused physician recruitment, will be strategies that will continue to hold eastern Oklahoma in good stead."





### Quick Facts:

- Located on the west side of the Saint Francis Hospital campus
- 450,000 square feet of new construction and 50,000 square feet of renovated space
- 150 beds in the new tower
- 85 rooms in the Trauma Emergency Center



### The new TEC will include:

- Accommodations for more than 120,000 patient visits annually (average of over 300 per day)
- Convertible area for mass casualty response within ambulance bay
- New clinical stations
- Four trauma/resuscitation rooms
- 12 acute/critical care rooms
- 39 adult general medicine stations
- Four triage stations
- One decontamination room
- Ability to expand to 114 clinical stations during disaster events
- Two computed tomography (CT) suites
- Two radiology rooms and one revascularization laboratory
- Two helipads on the roof of the patient tower
- Dedicated oversized trauma elevators
- Large covered ambulance bay to accommodate up to 14 ambulances at once

### The new bed tower will feature:

- 150 new acuity-adaptable private rooms (designed to be easily upgraded to an intensive care level)
- Two floors of intensive care beds (60 total)
- Three floors of surgical beds (90 total)
- Rooms designed for maximum visibility, expansive views, day lighting and adaptability

### In addition, the new TEC will contain a Pediatric Emergency Center (PEC) which will include:

- Accommodations for more than 30,000 pediatric patients annually
- A dedicated entrance and waiting area for children and parents
- 25 total pediatric treatment areas adjacent to main TEC
  - 22 areas for general medicine
  - One resuscitation room
  - Two triage bays

“Years of careful planning and close collaboration have been devoted to this project. And throughout the entire process, the focus has consistently been on doing the right thing for the community,” says David Wagner, vice president, facilities management, Saint Francis Health System. “The initial demographic and future healthcare trend studies we conducted all pointed to a population that is aging, as well as increased access in the new era of health reform. By increasing the number of licensed beds and ramping up key services and facilities, Saint Francis is well positioned to manage the needs of the aging population, as well as the healthcare of all other patients throughout the surrounding area.”

The new Saint Francis Hospital TEC and bed tower project has been designed with energy conservation in mind. The project followed guidelines and standards established by the U.S. Green Building Council and the Leadership in Energy and Environmental Design (LEED) certification program.







## Epic Strides For Patient Care

*It won't be long before paper charts, computer systems that don't "talk" to one another, and digital medical records that are difficult to share are a distant memory.*

Saint Francis Health System has begun implementation of Epic, the healthcare industry's leading electronic health record (EHR) software, throughout each of its hospitals, physician office locations, and all patient care service areas. System development is currently underway with an initial launch in physician offices and a second planned in the hospitals for June 2014.

"With the implementation of Epic, Saint Francis will continue to be at the forefront of healthcare technology and innovation. Through a seamless, completely integrated electronic health record system, the health system will have the opportunity to enhance the safety, quality and efficiency of the care delivery system," says Jake Henry Jr., president and chief executive officer, Saint Francis Health System.

With more than 200 current customers across the nation, Epic's electronic health record system is used by other well-known and highly respected academic medical centers and healthcare systems, including The Cleveland Clinic, Johns-Hopkins, Kaiser Permanente and Aurora Health Care.

"Epic will replace a total of 18 separate systems currently in use throughout Saint Francis Health System," says Mark Stastny, vice president of information systems. "As we get closer to full implementation of Epic,

### Epic Quick Facts:

- Provides a single patient record; clinical information will follow patients everywhere within Saint Francis Health System
- **Improves coordination, reduces duplication of care, avoids unnecessary tests, and greatly improves convenience of care for both clinicians and patients**
- Collects, manages, analyzes and reports clinical data across the Health System
- **Offers a patient's clinician access to information—24/7—at the click of a mouse**
- Gives patients easy electronic access to their own data, enhancing the ability to communicate with clinicians and engage them to take a more active role in their own care
- **Offers enhanced research, education, finance, revenue and billing capability**

### What Epic Means...

#### For our patients:

- Epic means healthcare providers will be able to access one up-to-date medical record — regardless of where they are receiving care within the health system.
- **MyChart®** – Health system patients will be able to use Epic's MyChart, a secure online patient portal that allows an individual to schedule physician appointments, view test results, access and pay billing statements, as well as obtain health education information. MyChart will be accessible online from a desktop or via smartphone application.

#### For physicians and staff throughout the Saint Francis Health System:

Epic will integrate all of our systems like never before to produce a level of standardization that decreases variation in care.

#### For Saint Francis patients and staff members alike:

Epic will provide safer, higher quality and cost efficient outcomes.

*"I'm excited about electronic medical records, in general, especially those that are universally accessible within Saint Francis Health System. The improvement to our continuity of care will be enormous."*

**Kevin Tulipana, D.O.**  
*Hospital Medicine*

anticipation continues to build throughout the health system. We look forward to the many ways Epic will transform the delivery of patient care, enhance quality, patient safety and customer service."

### One Patient, One Record

With the implementation of Epic, communication between physicians, nurses and other hospital staff will be

—With MyChart—  
**you can**



Request an appointment.



Access your test results.



Request prescription refills.



Pay your bill online.



made more efficient through the creation of a single patient record updated in real time. Healthcare providers will be able to access information during the course of care and easily order treatments based on best practices. This, in turn, will result in

*"The best part of Epic is we'll be able to read everyone's notes. They will be legible!"*

**Lawrence Lee, M.D.**  
*Family Medicine*

improved patient services, outcomes and overall healthcare quality.

In touting the virtues of Epic, "one patient, one record" isn't just a catchy tagline.

"It really is true. With Epic, every single patient will have one record within the entire health system," Stastny says. "With Epic, healthcare will be more streamlined and much more efficient. Essentially, Epic will replace the main infrastructure of our health system from an information technology perspective."

*"Ultimately, the goal of making the Epic change is to provide better care and patient safety. At the center of everything, patients are the biggest beneficiaries. Secondary benefits go to doctors, nurses and staff members who will be able to do their jobs better with improved access to patient information."*

**Mark Stastny,**  
*Vice President of Information Systems*





and specialized training. “This remarkable new procedure gives hope to so many patients who were once told nothing could be done to open their CTO blockages,” Dr. Childs says. “The BridgePoint devices create a pathway through which we can use angioplasty and stents to get through severe blockages or CTOs. Typically, those suffering from CTOs experience angina which may present as chest discomfort, heaviness, pressure, aching, burning, fullness, squeezing or simply shortness of breath. By improving blood flow, these symptoms can be reduced and as a

result, patients can enjoy a better quality of life.”

In fact, Dr. Childs can immediately think of a number of patients who may benefit greatly from the CTO procedure. “Case in point is a younger female patient I recently saw. She had a CTO and had been experiencing chest pain for some time. Yet, in my opinion it seemed extreme to send a person this young and with only one symptom of heart disease to bypass surgery. It’s great knowing I’ll be able to help people like her. I tell patients all the time that I stand on the shoulders of giants. People before

# A New Pathway to Heart Care

IT’S A NEW ERA IN CARDIAC CARE and Saint Francis Health System is pleased to be the first in Tulsa to offer a revolutionary procedure for chronic total occlusion (CTO). Patients suffering from severely or completely clogged arteries, known as coronary chronic total occlusions, now have a new lifesaving and non-invasive option, as opposed to traditional open heart bypass surgery. The CTO procedure also reduces risks to patients and will dramatically help improve recovery times.

“We know heart disease is responsible for one in four deaths in the U.S. and remains the country’s No. 1 killer of both men and women,” says Doug Williams, vice president of Heart Hospital at Saint Francis. “Less known is the fact that chronic total occlusions (CTOs) affect the survival and quality of life for innumerable people, and have historically been an untreatable condition for many patients. While some are treated with bypass surgery, 60% of patients with CTOs are treated only with prescription drugs. The CTO procedure offers a minimally-invasive alternative for countless patients who are considered too risky for bypass operations, and still others whose surgically repaired arteries have reclogged.”

## HOW THE CTO PROCEDURE WORKS

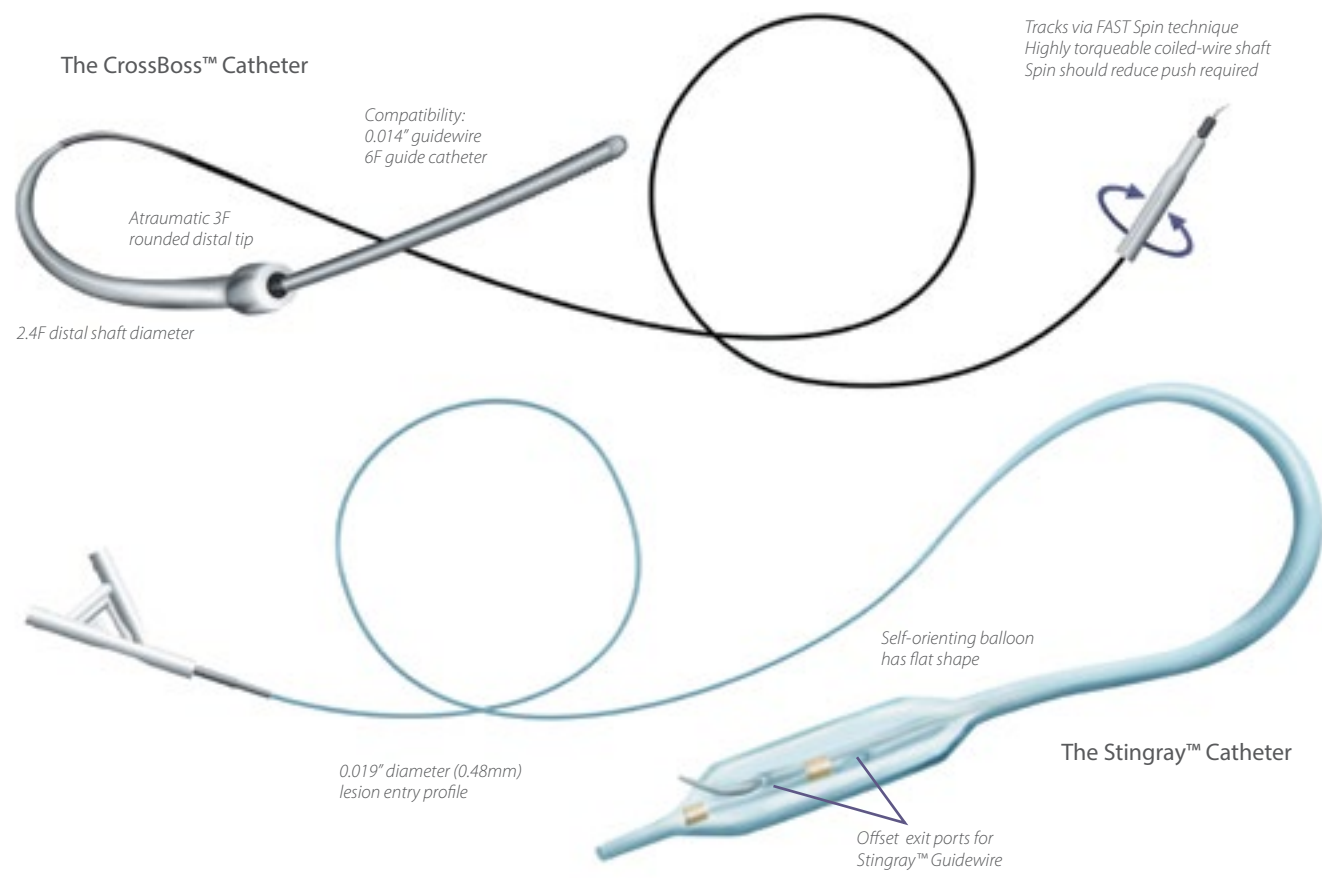
Three medical devices developed by privately owned BridgePoint Medical (which was acquired by Boston Scientific Corporation in 2012) actually enable doctors to go through or around complete blockages to reopen once-closed coronary arteries. The devices – the CrossBoss™ catheter, the Stingray™ catheter and the Stingray™ guide wire – are the only such devices approved by the U.S. Food and Drug Administration. With this ground-breaking procedure, CTO blockages can now be treated with angioplasty and stents through a catheter procedure, meaning it is no longer necessary to cut through the chest to perform bypass surgery.

The new CTO procedure is being performed at Saint Francis by cardiologist Darwin B. Childs, D.O., who underwent extensive



Darwin B. Childs, D.O.





me have come up with this amazing technology and my patients get to benefit from it," Dr. Childs says. "It is so satisfying to see patients who didn't have much hope before this procedure was available. I am very proud to be a part of this program at Saint Francis and I look forward to helping people enjoy healthier and more active lifestyles."

Doug Williams adds: "Saint Francis Health System is dedicated to bringing the best care and technology to people in this region. The CTO procedure requires new techniques and training and Saint Francis is now among a select group of hospitals nationwide to offer it. 'Hats off' to Dr. Childs for his personal commitment, and to the health system as a whole for its support in making the CTO procedure available to our patients."

### SAINT FRANCIS CATHETERIZATION LAB: THE HEART OF INTERVENTIONAL CARDIOLOGY

The cardiac "cath" lab at the Heart Hospital at Saint Francis is home to a wide variety of diagnostic and treatment techniques that allow doctors to tailor care for the specific needs of individual patients. Procedures done in the cath lab

are sometimes referred to as catheter-based modalities because they all employ the basic techniques of cardiac catheterization. Cardiac catheterization is when a narrow tube, called a catheter, is inserted into an artery or vein of your leg or arm and passed through the blood vessel to your heart or the heart's circulation.

In addition to the new CTO procedure, other minimally-invasive surgeries performed at the Saint Francis Cath Lab include:

#### Transcatheter Aortic Valve Replacement (TAVR)

TAVR is an alternative treatment option to traditional open heart surgery for patients presenting with severe aortic stenosis (a disease of the heart valves in which the opening of the aortic valve is narrowed).

Currently, the TAVR procedure is limited to patients that meet a defined set of criteria and are considered non-surgical candidates. The procedure consists of inserting an artificial aortic valve via a catheter-based delivery system.



#### LARIAT™

An advanced solution for those at risk for stroke, this new non-invasive procedure can virtually eliminate the risk for people who cannot tolerate blood thinners, as well as those affected by atrial fibrillation (an irregular and often rapid heart rate that causes poor blood flow to the body).

Just as its name implies, LARIAT is a lasso-like tool that is inserted through a puncture in the chest. Essentially, this tool is a stitch that loops around the left atrial appendage, thus closing it off and preventing both blood clots and strokes. Patients who qualify for the LARIAT procedure can avoid open-heart surgery and can often go home the following day.

Be true to your heart.



6161 South Yale Avenue | Tulsa, OK 74136 | 918-502-2050 | saintfrancis.com/hearthospital



# Help Your Heart

There are some risk factors for heart disease you cannot change, but some you can. Changing the risk factors that you have control over will help you live a longer, *healthier* life.

## Risk factors you **cannot** change:



**Your age**  
Risk of heart disease increases with age.



**Your gender**  
Men have a higher risk of getting heart disease than women who are still menstruating. After menopause, the risk for women gets closer to the risk for men.



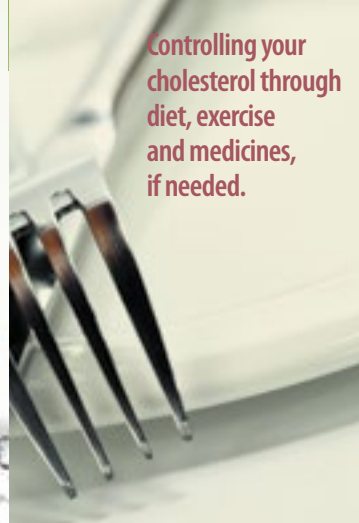
**Your genes or race**  
If your parents had heart disease, you are at higher risk. African-Americans, Mexican Americans, American Indians, Hawaiians and some Asian Americans also have a higher risk for heart problems.

## Risk factors you **can** change:

**Smoking.**  
If you do smoke, quit.



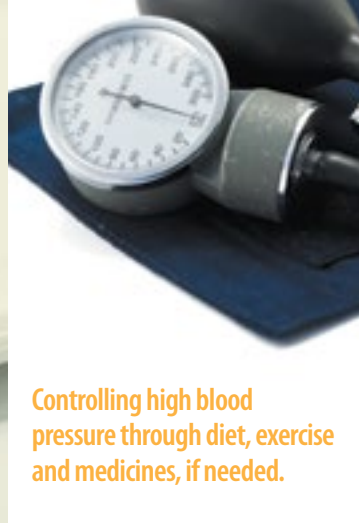
Controlling your cholesterol through diet, exercise and medicines, if needed.



Controlling diabetes through diet, exercise and medicines, if needed.



Controlling high blood pressure through diet, exercise and medicines, if needed.



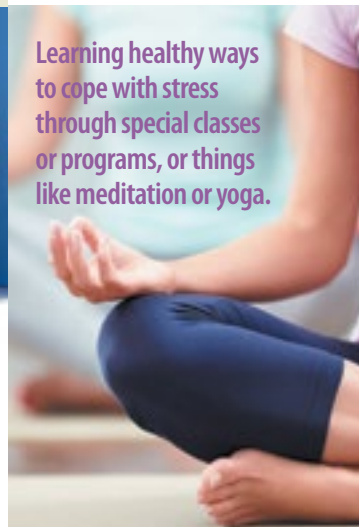
Exercising at least 30 minutes a day.



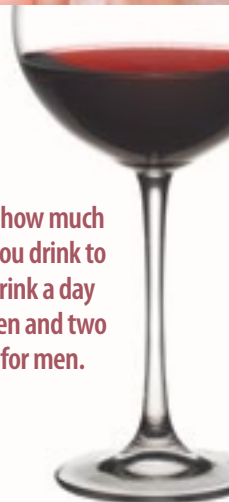
Keeping to a healthy weight by eating healthy foods, eating less and joining a weight loss program, if you need to lose weight.



Learning healthy ways to cope with stress through special classes or programs, or things like meditation or yoga.



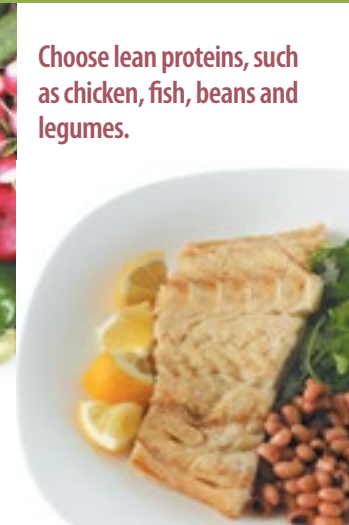
Limiting how much alcohol you drink to one (1) drink a day for women and two (2) a day for men.



**Good nutrition** is important to your heart health and will help control some of your risk factors:



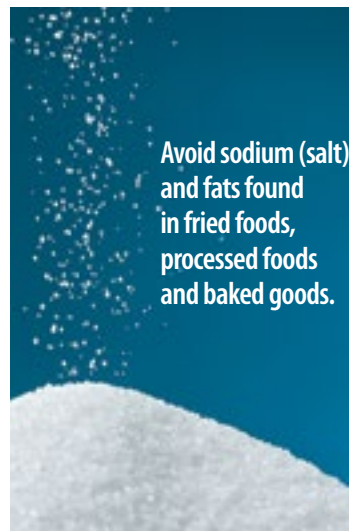
Choose a diet rich in fruits, vegetables and whole grains.



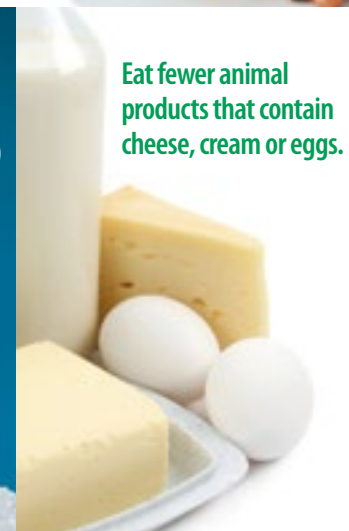
Choose lean proteins, such as chicken, fish, beans and legumes.



Choose low-fat dairy products, such as 1% milk and other low-fat items.



Avoid sodium (salt) and fats found in fried foods, processed foods and baked goods.



Eat fewer animal products that contain cheese, cream or eggs.



Read labels, and stay away from "saturated fat" and anything that contains "partially-hydrogenated" or "hydrogenated" fats. These products are usually loaded with unhealthy fats.

Follow these guidelines and the advice of your doctor to lower your chances of developing heart disease.



# CANCER SURVIVOR CAN'T SAY ENOUGH GOOD THINGS ABOUT THE SAINT FRANCIS ONCOLOGY TEAM

According to cancer survivor, Helen Campbell, it would be an impossible task to say enough good things about Warren Clinic Medical Oncology. And, foremost among her words of praise is, she doesn't think she'd be around if it wasn't for this special group of people.

**On October 17, 2012, Helen was diagnosed with anaplastic large cell lymphoma**, a rare type of non-Hodgkin lymphoma affecting only one to two percent of the adult population. Initial symptoms can include painless swelling of lymph nodes, rapid weight loss and fatigue.

"Truly, when 'Dr. Vicki' (aka Vicki Baker, M.D.), oncologist on staff at Warren Clinic Medical Oncology, Dr. Joe Lynch, oncologist and director of the Saint Francis Bone and Marrow Transplant Program, and the rest of the Saint Francis Oncology staff took over my care and immediately zeroed in on the correct diagnosis, everything started to turn around dramatically," Helen says. "Prior to that, I had been through a series of missteps and inaccurate diagnoses. It was so frustrating because I knew something was very wrong."

Helen, who has been a hospice nurse in the Tulsa area for 40 years, found it ironic that during all those years, she'd never taken care of a patient with lymphoma. "When it was established that I had Stage IV lymphoma, (Stage IV being the most advanced), I was shocked. It seemed like a very gloomy picture," Helen says. "But, Dr. Baker is a real spitfire and got the wheels for my treatment rolling immediately. Her knowledge base, humility and compassion are truly exceptional. I can't say enough good things about her either."

The history between Helen and Dr. Vicki Baker goes way back. "Our paths initially crossed due to her career as a hospice nurse and mine as an oncologist," Dr. Baker says. (Dr. Baker has

practiced as an oncologist in the Tulsa community since 1990.) "Helen is an outstanding lady – so kind and compassionate. She has always taken such great care of her patients and their families. Even though I was very sorry her cancer brought us together this time, I was so grateful for the opportunity to give her the best possible care."

## PUTTING HELEN'S TREATMENT PLAN IN ACTION

Helen's initial form of treatment was what is commonly known as CHOP. CHOP is the acronym for a chemotherapy regimen used in treating non-Hodgkin lymphoma and consists of cyclophosphamide, an alkylating agent which damages DNA by binding to it and causing the formation of cross-links; hydroxydaunorubicin, an intercalating agent which damages DNA by inserting itself between DNA bases; oncovin, which prevents cells from duplicating by binding to the protein tubulin; and prednisone or prednisolone, which are corticosteroids.

After a series of outpatient CHOP treatments, Helen received a bone marrow transplant in early June 2013. "Following Helen's first stage of treatment, our team agreed a bone marrow transplant was necessary to ensure we were doing all we could to get rid of the lymphoma," Dr. Baker says.

A bone marrow transplant is a procedure in which bone marrow that is diseased or damaged is replaced with healthy



Vicki Baker, MD

bone marrow. The bone marrow to be replaced may be deliberately destroyed by high doses of chemotherapy and/or radiation therapy.

## RECOVERING AND REBUILDING

Following the bone marrow transplant, Helen recovered at home throughout the summer with the help of a nurse aide. "A bone marrow transplant is an immensely powerful treatment for a serious disease, so of course, it knocks 'the stuffing' out of you for awhile," Helen says. "But, day by day, I began to feel a little bit stronger, so much so that by the end of August, I returned to the part-time job I love of being a Practical Nursing instructor at Tulsa Tech College."

In September, Helen's 100-day (since the bone marrow transplant) check-up with Dr. Lynch took place. "He said it looked great – no cancer at all – and that he didn't need to see me again for a year," Helen says. "Hallelujah! It was so exciting... a truly remarkable thing."

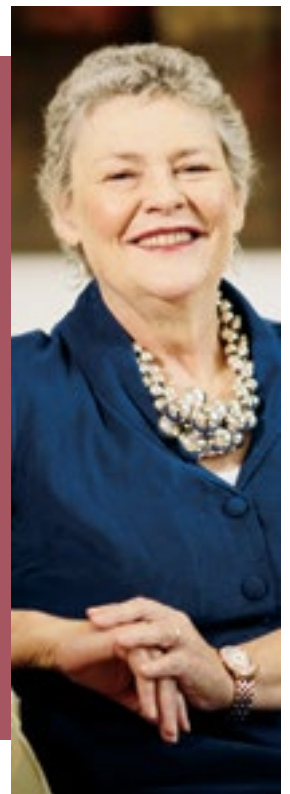
Dr. Baker adds: "Every oncologist faces some cases that are sad, but there are so many others that are wondrous. Medical science keeps improving and when we are able to get great results and restore someone's health and well-being, it is the most satisfying thing in the world. There are no words for it."

Now, more than ever, Helen is enjoying life and appreciating every day to the fullest. "I'm so grateful for every single day and

for the wonderful people in my life...and they certainly include the oncology team at Saint Francis. I love them all!" she says.

"From the handwritten notes, handmade quilts and kind gestures, I can honestly say I received outstanding and compassionate care from every single person in Saint Francis' Oncology group. And, being a longtime nurse myself, I am pretty particular about that sort of thing."

**Helen Campbell,**  
cancer survivor





# MORE ABOUT LYMPHOMA

Lymphoma is the most common blood cancer. It occurs when cells of the immune system called lymphocytes (a type of white blood cell) grow and multiply uncontrollably. The two main forms of lymphoma are Hodgkin lymphoma and non-Hodgkin lymphoma (NHL).

**Cancerous lymphocytes can travel to many parts of the body, including the lymph nodes, spleen, bone marrow, blood or other organs, and form a mass called a tumor.** The body has two main types of lymphocytes that can develop into lymphomas: B-lymphocytes (B-cells) and T-lymphocytes (T-cells). Anaplastic large cell lymphoma, the type of cancer Helen Campbell had, is a rare type of NHL, but one of the more common subtypes of T-cell lymphoma.

## CAUSES

For most patients, the cause of NHL is unknown. But lymphomas may develop in people with weakened immune systems, including persons who have had an organ transplant or persons with HIV infection. NHL most often affects adults. Men get NHL more often than women. Children can get some forms of lymphoma. There are many types of NHL. Specific types are grouped according to how fast the cancer spreads. The cancer may be low grade (slow growing), intermediate grade or high grade (fast growing). The cancer is further grouped by how the cells look under the microscope; what type of white blood cell it originates from; and whether there are certain DNA changes.

## SYMPTOMS

Symptoms depend on what area of the body is affected by the cancer and how fast the cancer is growing. Symptoms may include:

- Night sweats (soaking the bed sheets and pajamas even though the room temperature is not too hot)
- Fever and chills that come and go
- Itching
- Swollen lymph nodes in the neck, underarms, groin or other areas
- Weight loss
- Coughing or shortness of breath if the cancer affects the thymus gland or lymph nodes in the chest, putting pressure on the windpipe (trachea) or other airways
- Abdominal pain or swelling, leading to loss of appetite, constipation, nausea and vomiting
- Headache, concentration problems, personality changes or seizure if the cancer affects the brain

## EXAMS AND TESTS

The doctor will perform a physical exam and check body areas with lymph nodes to feel if they are swollen. The disease may be diagnosed after biopsy of suspected tissue, usually a lymph node biopsy. Other tests that may be done include:

- Blood test to check protein levels, liver function, kidney function and uric acid level
- Complete blood count (CBC)
- Gallium scan (a nuclear medicine test using a special camera to take pictures of specific tissues in the body)
- PET (positron emission tomography) scan

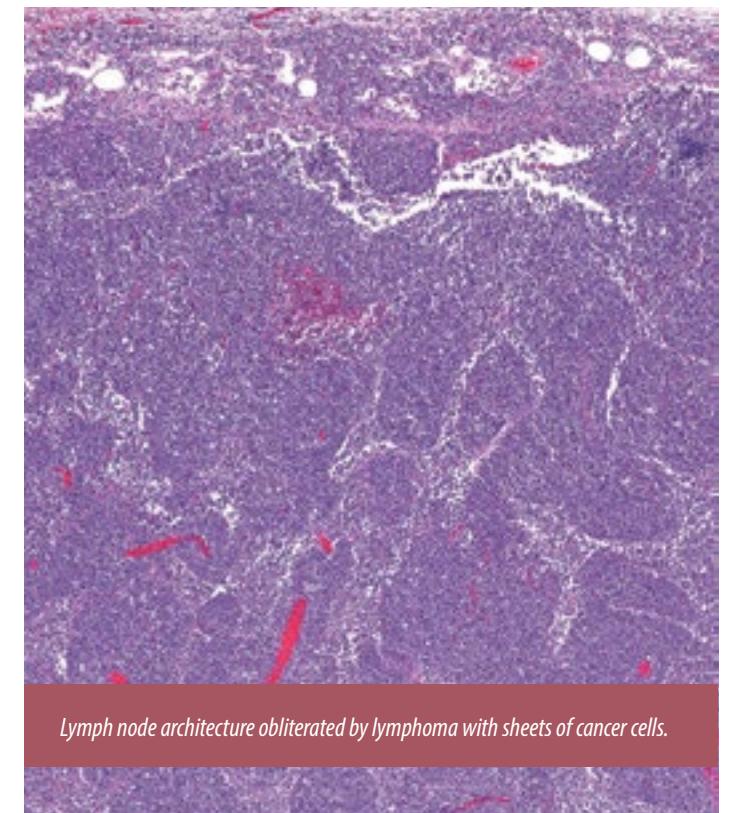
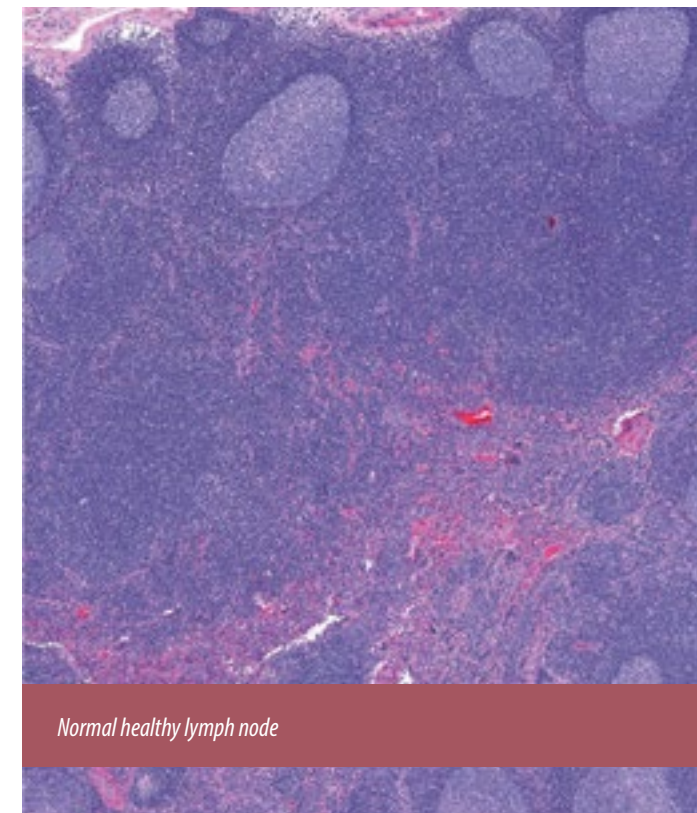
If tests show you have NHL, more tests will be done to see how far it has spread. This is called staging. Staging helps guide future treatment and follow-up. It also gives you an idea of what to expect in the future.

## TREATMENT

Treatment depends on:

- The type of lymphoma
- The stage when you are first diagnosed
- Your age and overall health
- Symptoms, including weight loss, fever and night sweats

You may receive chemotherapy, radiation therapy or both. Or you may not need treatment. Your doctor can tell you more about your specific treatment. Radioimmunotherapy may be used in some cases. This involves linking a radioactive substance to an antibody that targets the cancerous cells and injecting the substance into the body. High-dose chemotherapy may be given when NHL returns after treatment or does not respond to the first treatment. This is followed by an autologous stem cell transplant (using your own stem cells). Blood transfusions or platelet transfusions may be required if blood counts are low.





# Paying it Forward



## Oncology Patient at Saint Francis Hospital Uses Her Chemotherapy Sessions as a Time to Help Others

Twenty-one-year-old, Paige Weitkamp, didn't waste time feeling sorry for herself when she was diagnosed with Stage II Hodgkin's lymphoma in August 2013. That's just not her style. What she did instead—along with the help of her "Mi Mi" (grandmother, Jill Minihan)—was focus on doing something nice for others.

Paige's treatment included weekly eight-hour sessions of chemotherapy for six cycles, followed by radiation for five weeks. "I knew I was going to have a lot of time on my hands and I wanted to spend it helping someone else," she says. After a stroll through the halls of the Oncology Unit in The Children's Hospital at Saint Francis, she knew exactly where she wanted to spread a little sunshine. So, she and her grandmother got to work doing just that.

"I'm so lucky in many ways because the type of lymphoma I have is curable and I will be fine," Paige says. "My heart goes out to some of the children in the Oncology Unit at The Children's Hospital at Saint Francis. Now, that's my idea of brave."

### Therapy Sessions

As it turns out, Paige's chemotherapy sessions were also therapy for the soul. When she was in treatment, she and her grandmother lovingly measured, cut out and sewed countless burp cloths for babies in the Henry Zarrow Neonatal Intensive Care Unit, as well as created colorful custom-made pillow slips for children in the Oncology Unit. And, over the holidays, they decorated and filled cups with all sorts of Christmas goodies, including candy canes, little bears and stickers. The final touch on the items is a tag that simply says, "Made with love by Paige."

"I've been given so much throughout this experience. My family and my oncologist at Warren Clinic Oncology, Muhammad Allahyar Janjua, M.D., have been great. Also, at the time I was diagnosed, I was working as a medical assistant for Sudip Tripathy, M.D., who is an internal medicine doctor at the Warren Clinic Tower. He's been so understanding and supportive too," Paige says. "I don't really know how to thank people, so I guess this is my way of saying thanks and hopefully helping others at the same time."

### Looking Ahead

Looking forward, Paige has big plans for continuing her path of giving to others—particularly children dealing with cancer. "I have returned to school and am planning to earn a degree in nursing," she says. "Hopefully, one day, I can work at The Children's Hospital at Saint Francis in the Oncology Unit. I definitely feel that is the place for me."



## Health and Wellness Programs

Health Zone offers classes and programs to guide members on a road to a healthier lifestyle.

**Zone Transformation** – adult weight-loss and nutrition program

**Clear Direction** – tobacco cessation program

**Mind Over Matters** – a mind and body stress reduction program

**ShapeDown** – pediatric weight management and wellness program

**Safe Kids** – childhood injury prevention program

**Health Zone at Saint Francis** is a medically-based, state-of-the-art 70,000 square-foot fitness facility offering an array of exercise equipment, an extensive selection of classes and a variety of programs.

The facility is equipped with a 15,000 square-foot exercise area with the latest equipment, cardiovascular and strength training machines, free weights and three-lane indoor track.



Call Health Zone at (918) 494-1671 to schedule a tour or visit [www.saintfrancis.com/healthzone](http://www.saintfrancis.com/healthzone) to print a free, one-week guest pass.

5353 East 68th Street South • Tulsa, Oklahoma 74136





# presence

a publication of Saint Francis Health System

## **MISSION**

*To extend the presence and healing ministry of Christ in all we do*

## **VISION**

*Saint Francis Health System will collaborate with others who share its values to be the regional leader in the delivery of quality Catholic healthcare services*

## **VALUES**

### **EXCELLENCE**

*Promoting high standards of service and performance*

### **DIGNITY**

*Respecting each person as an inherently valuable member of the human community and as a unique expression of life*

### **JUSTICE**

*Advocating for systems and structures that are attuned to the needs of the vulnerable and disadvantaged and that promote a sense of community among all persons*

### **INTEGRITY**

*Encouraging honesty, consistency and predictability in all relationships*

### **STEWARDSHIP**

*Ensuring prudent use of talents and resources in a collaborative manner*