New Pediatrician Joins Livingston HealthCare

Livingston HealthCare is excited to announce the arrival of our new pediatrician, Dr. Heather DiCross. Dr. DiCross will be joining forces with Pediatric Nurse Practitioner, Paula Coleman, who has practiced at Livingston HealthCare for nine years. Together they will see all the pediatric patients at Livingston HealthCare’s Clinic on River Drive at 1001 River Drive. There has been a need and desire to have a Pediatrician at Livingston HealthCare for many years and we are pleased to meet this need for our community.

Dr. DiCross was born in Texas and grew up in Ohio. She received her medical degree from the University of Toledo College of Medicine and completed her residency at Geisinger Medical Center’s Janet Weis Children’s Hospital this past spring. In her spare time Dr. DiCross and her husband, James, enjoy camping, hiking, and playing with their three dogs. They love to read and have a full library of books. “We both feel that Livingston is the perfect place for us and we are so excited to start our new life here,” said Dr. DiCross. Dr. “D”, as kids call her, will begin seeing patients on August 13th. To schedule an appointment please call the Clinic on River Drive at 406-222-0800.

Recreational Trails Program Grant

LHC Foundation is happy to announce funding from Montana Fish, Wildlife, & Parks to help us build a multi-purpose connector trail from the new hospital site to the Myer’s River View Trail. Since portions of the trail will be built on city property, the City of Livingston has generously offered to provide an in-kind contribution of labor and equipment for the section that lies on city property. This nature trail will be one of the many exciting amenities the new hospital and clinic facility will have to offer our patients, staff, and guests.

New Family Centered Prenatal Education Series Received Funding from Park County Community Foundation

Livingston HealthCare’s Mother and Newborn Services Department launched a new holistic program to support and prepare families expecting a new baby. The six-part prenatal education series is being offered in cooperation with Community Health Partners and with funding from Park County Community Foundation. The classes are free and cover a wide range of topics including taking care of yourself during pregnancy, learning about labor and birth, preparing for family-centered birth, breast feeding, caring for yourself and your newborn after childbirth, and preparing siblings for a new baby. Class attendees will receive information on nutrition, prenatal massage, prenatal yoga, and other integrative techniques for staying comfortable and healthy during pregnancy. Classes are being offered every few months, to register please call 823-6660 or email Terri.Wegner@LivingstonHealthCare.org.

Food and Nutrition Services Receive the EcoStar Pollution Prevention Award

Livingston HealthCare’s Food and Nutrition Services Department received yet another award to their outstanding program. In April of 2014, several members of the Food and Nutrition Services Team traveled to Helena to receive the EcoStar Pollution Prevention Award presented by Governor Bullock. The EcoStar award is given to small businesses or organizations who are taking environmentally responsible steps to reduce solid and hazardous waste, maximize efficiencies, conserve energy and water, and improve air quality. Livingston HealthCare’s Farm to Institution Program supports our vision of providing the best care to patients by providing healthy, nutrient-dense food options for optimal healing and wellness, modeling community leadership to others in the local area and state by procuring local resources and supporting the local economy, and supporting fiscal responsibility by keeping food costs in check.
Osteoporosis is a disease of progressive bone loss associated with an increased risk of fractures. The term Osteoporosis literally means porous bone. This disease often develops unnoticed over many years, with no symptoms or discomfort until a fracture occurs—thus it is often called the silent disease. It is estimated that more than 44 million Americans are affected by Osteoporosis, accounting for nearly 2 million bone fractures per year, and according to the National Osteoporosis Foundation, fractures are expected to rise to over 3 million by 2025.

Certainly the most serious and debilitating fracture is the hip fracture. Most hip fracture patients were living independently prior to injury, and almost all patients who experience this type of fracture will require walking aids. Nearly half will permanently need a cane or walker to move around their house and outside.

Physicians don’t know the exact medical cause of Osteoporosis, but they are able to identify major factors that can lead to the disease. These factors are age, heredity, nutrition, lifestyle, and medications. We all lose bone with age. After 35 years of age, the body slows the amount of new bone it produces to replace old bone. Hereditary risk factors include history of fractures, a petite, slender body type, fair skin, and being of Caucasian or Asian descent. Patients who have diets that are low in calcium or lack proper nutrition in general, live a sedentary lifestyle, smoke, or drink alcohol excessively have been linked to Osteoporosis. Osteoporosis has also been linked to the use of some medications, including steroids.

By consuming adequate amounts of calcium, vitamin D, and exercising regularly, you can prevent Osteoporosis, slow the progression, and protect yourself from fractures. Whatever your age or health status, you need calcium to help keep your bones healthy. Calcium continues to be an essential nutrient through the life cycle because your body loses calcium every day. By increasing the intake of calcium and vitamin D, you can reduce the risk of fracture. The National Academy of Science makes the following recommendations regarding the daily intake of calcium:

### Recommended Daily Calcium Intake

- **Males and females 9 to 18 years:** 1,300 mg per day
- **Women and men 19 to 50 years:** 1,000 mg per day
- **Pregnant or nursing women up to age 18:** 1,000 mg per day
- **Women and men over 50 years:** 1,200 mg per day

Examples of calcium rich foods are yogurt, cheese, sardines, soybeans, and green leafy vegetables including broccoli, kale, spinach, and collard greens. Vitamin D aids your body in the absorption of calcium. The recommended intake for vitamin D is 200-600 IU daily. Supplemented dairy products are an excellent source of vitamin D: a cup of milk, for example, contains 100 IU compared to a multivitamin, which typically contains 400 IU.

No matter what your age is, exercise has been proven to minimize bone loss while providing additional health benefits. Physicians believe that an exercise program of moderate, regular exercise (3 to 4 times a week) is effective for both the prevention and management of Osteoporosis, and suggest that weight bearing exercises such as walking, running, hiking, treadmill exercises, and weight lifting are best.

Falls account for 50% of fractures, thus many fractures can be prevented by avoiding falls. Programs and exercises that focus on balance and balance training, especially yoga and tai chi, should be emphasized. Livingston HealthCare offers the Otago Fall Prevention Program through our Rehabilitation Services department. In an effort to help reduce the frequency of fall related injuries, Livingston HealthCare proudly refers patients to the program. Otago consists of stretching, strengthening, and balancing techniques that have been shown to help reduce falls in the elderly by 35%.

Treatment for Osteoporosis focuses on prevention of future bone loss. Treatment is often a team approach that consists of your physician, an orthopedist, and a gynecologist. At Livingston HealthCare we have the ability to embody this team approach for Osteoporosis treatment. If you are concerned about Osteoporosis or have any questions, please speak with your provider or visit the National Osteoporosis Foundation at www.nof.org. To speak with a Livingston HealthCare staff member about the Otago Fall Prevention Program, please call 406-222-7231.
Anthocyanins, Anyone?
BY MACKENZIE STARK, MSU FOOD & NUTRITION SERVICES INTERN

Phytochemicals, which literally means plant-chemical, are chemicals in plants that have been found to have protective or disease preventive properties. From the deep red hue of raspberries to the pungent aroma of garlic, phytochemicals give plants their distinctive colors, smells, and tastes. Phytochemicals are indicative of the health of a plant, concentrations increase when a plant or its fruit is ripe and indicate which nutrients may be present. It has been discovered that plants produce these phytochemicals in order to protect themselves but emerging research suggests that they can also protect humans against the development of certain diseases.

There are more than 10,000 known phytochemicals in the plant-based foods we eat. The largest class of phytochemicals is known as flavonoids, which are antioxidants that have beneficial health effects. Anthocyanins are one of the more than 6,000 members of the flavonoid family. This particular compound has been used in folk medicine for generations, but only recently have the specific pharmacological properties of anthocyanins been isolated and studied.

Anthocyanins provide the bright red-orange to blue-violet colors of many fruits and vegetables. These compounds are most abundant in berries and their juices, red and purple grapes, red wine, sweet cherries, eggplants, black plums, blood oranges and red cabbage. Plants produce anthocyanins as a protective mechanism against environmental stressors. These compounds are produced in the roots, stems and leaves and are believed to provide resistance against environmental hazards.

To a certain degree, many of the health benefits of anthocyanins still remain a mystery. There is still some uncertainty about the bioactivity, uptake, absorption, bioavailability and distribution of anthocyanins in the human body. However, the emerging science and literature is exciting, and most researchers are calling for more studies in order to explore the potential health benefits of these compounds.

Laboratory research, and studies in both humans and animals have suggested that anthocyanins may play an important role in helping to reduce the risk of developing cardiovascular disease (CVD), cognitive decline, and cancer. Initially, researchers thought that it was the antioxidants found in anthocyanins that were linked to the prevention of these diseases, but now research suggests that anthocyanins contain other unidentified chemical properties that are beneficial to health as well.

There have been several studies that have found a correlation between the reduction of CVD and the consumption of anthocyanin-rich foods. For example, the Iowa Women’s Health Study found that consuming anthocyanin-rich strawberries and blueberries once per week was associated with a significant reduction in death from CVD. There have also been several epidemiological studies that have found an association between the consumption of red wine and decreased risk of death from CVD. This research suggests that the link between CVD protection and anthocyanin consumption may be due to the ability of these phytochemicals to decrease inflammation associated with CVD.

Research has also suggested that anthocyanins may reduce the risk of developing cancer. The exact mechanism for how this particular phytochemical prevents cancer is unclear; however, laboratory studies have indicated that anthocyanins do more than just act as antioxidants. This includes activating detoxifying enzymes, preventing cancer cell proliferation, induce cancer cell death, have anti-inflammatory effects, prevent cancer cell invasion, and induce differentiation.

As for cognitive function, research suggests that anthocyanins have the ability to enhance memory and help prevent age-related declines in mental cognition. Several studies have found that berries, most notably blueberries, can effectively reverse age-related deficits in certain aspects of working memory.

Although the exact mechanisms are unclear as to how anthocyanins work in the human body to promote health and prevent disease, the research supports eating a variety of anthocyanin-rich foods for all of their health benefits. An easy way to add more anthocyanins into your diet is to keep fresh and/or frozen berries on hand, and throw them into a smoothie for a quick, enjoyable snack. Another easy anthocyanin snack is to mix raisins and prunes with different nuts for a healthy, antioxidant-rich trail mix. Purple cabbage can be stir-fried or sliced and tossed with a green salad for an anthocyanin boost. It’s fun to try different fruits and vegetables that you may not be very familiar with, such as black/purple corn, purple carrots, elderberries and eggplant. On this page is a recipe for Baba Ganoush, which is a roasted eggplant spread. Enjoy!
LHC WORKING TOWARD
Baby-Friendly Designation

Livingston HealthCare’s Mother & Newborn Services team are on their way to being recognized as a designated Baby-Friendly Hospital. The Baby-Friendly Hospital Initiative was launched by the World Health Organization (WHO) and the United Nations Children’s Fund (UNICEF) to encourage and recognize hospitals and birthing centers that offer an optimal level of care for infant feeding and mother/baby bonding. By adopting the Baby-Friendly program, Livingston HealthCare will provide new mothers with the information, confidence, and skills to initiate and continue breastfeeding or feeding formula safely. The program consists of four phases including: Discovery, Development, Dissemination, and Designation. Hospitals working through the program are responsible for creating a strategic plan, updating organizational policies and procedures, implementing training to staff, and will receive an on-site assessment.

The Mother & Newborn Services Department at Livingston HealthCare is currently in the third phase of the program, the Dissemination phase. During this phase, staff will implement new and updated policies created during the previous stages and track data while evaluating infant feeding outcomes. In September of 2014, the Mother & Newborn Services Department will move into the final Designation phase, where they will receive an on-site evaluation from the Baby-Friendly Assessment Team. Once approved, Livingston HealthCare will be one of only two facilities in Montana with the official Baby-Friendly Hospital designation.

By becoming a Baby-Friendly Designated Hospital, patients of Livingston HealthCare will understand the benefits of breastfeeding, receive feeding support, and adopt best infant feeding practices all while developing an intimate mother/baby bond. Livingston HealthCare Obstetrics and Gynecology Physician, Dr. Denise Helin, described the importance of the initiative explaining “when Livingston HealthCare achieves the designation of Baby-Friendly it signals to the community and prospective patients, that we have a serious and tangible commitment to Family-Centered birth and care. Having knowledgeable and supportive providers and nursing staff means that families can be confident their newborn will have the healthiest possible start to life.” Additionally, Livingston HealthCare has launched a series of Family-Centered Prenatal Education classes for expecting mothers and families. The Family-Centered Prenatal Education classes are free to the public and focus on pregnancy topics such as nursing, nutrition, and planning for a newborn in the home. This class series connects participants to Baby-Friendly techniques by encouraging breastfeeding and mother/baby bonding. “Families that attend prenatal classes learn about the importance of exclusive breastfeeding and begin their journey with the newborn having learned how to succeed,” Helin said.

For more information about Mother & Newborn Services or the Family-Centered Prenatal Education Class series, visit www.LivingstonHealthCare.org or call 406.222.0800.

“...FAMILIES CAN BE CONFIDENT THEIR NEWBORN WILL HAVE THE HEALTHIEST POSSIBLE START TO LIFE.”

Calendar of Events

AUG

- Livingston Hoot: Livingston HealthCare Booth 5:30-9:30pm in Downtown Livingston
- New Pediatrician, Dr. Heather DiCross begins seeing patients
- Trails Rx Run 7:30am at Northside Soccer Fields
  Register at www.LivingstonTrailsRx.com

SEP

- Blood Drive 11:30 am to 5:30 pm St. Paul’s Lutheran Church
- Blood Drive 9 am to 1 pm St. Paul’s Lutheran Church

NOV

- Fall Health Festival Park County Fairgrounds

Outreach Clinics:
- Bozeman OB/GYN Clinic (August 8 & 22, September 5 & 19)
- Orthopedic in Big Timber (1st Friday of every month)
- Rehabilitation Services in Gardiner (Every Monday, Wednesday, Friday)
- Rehabilitation Services in Wilsall (Every Tuesday and Thursday)
These babies were delivered with care by their parents, with support from the Livingston HealthCare Obstetrics Team.

Jonathan David Elwood Erickson  
Born: Oct. 4, 2013  
Wt: 7 lbs 2 oz  
Length: 20 inches  
Parents: Nathan and Jessica Erickson  
Livingston  
Male

Ilise Louise Moss  
Born: Oct. 8, 2013  
Wt: 7 lbs 8 oz  
Length: 20.5 inches  
Parents: Karine and Scott Moss  
Livingston  
Female

MacClain Robert Farrell  
Born: Oct. 11, 2013  
Wt: 8 lbs 11oz  
Length: 21 inches  
Parents: Cheyne Farrell  
Livingston  
Male

Izabelle Roze Potter-Spanne  
Born: Oct. 17, 2013  
Wt: 7 lbs  
Length: 19.5 inches  
Parents: Brandy Potter and Justin Spanne  
Pray  
Female

Phoenix Ash Carlson  
Born: Oct. 20, 2013  
Wt: 7 lbs  
Length: 18.5 inches  
Parents: Daniel Vasquez and Brad Carlson  
Livingston  
Female

Alice Jean Burford  
Born: Oct. 25, 2013  
Wt: 6 lbs 14oz  
Length: 20 inches  
Parents: Ivy and Drake Burford  
Livingston  
Female

Molly Marie Yuvan  
Born: Oct. 30, 2013  
Wt: 7 lbs  
Length: 20 inches  
Parents: Bridget and Jason Yuvan  
Livingston  
Female

Ander James Nelson  
Born: Nov. 17, 2013  
Wt: 7 lbs 15oz  
Length: 19.5 inches  
Parents: Jacquie and Tucker Nelson  
Livingston  
Male

Mya Dori Dailey  
Born: Nov. 19, 2013  
Wt: 6 lbs 4 oz  
Length: 19.5 inches  
Parents: Milee and Mike Dailey  
Pray  
Female

Piper Pielaeat Warren  
Born: Nov. 30, 2013  
Wt: 5 lbs 8 oz  
Length: 19 inches  
Parents: Jessica and Jamey Warren  
Livingston  
Female

Niklas Edmond Clemons  
Born: Nov. 30, 2013  
Wt: 8 lbs 3 oz  
Length: 21 inches  
Parents: Kathryn and Martin Clemons  
Livingston  
Male
Sawyer Patrick Stott  
Born Dec. 11, 2013  
Wt: 8 lbs.  
Length: 22 inches  
Parents: Nicole and Matt Stott  
Livingston  
Male

Elizabeth LaNise Brandon  
Born Dec. 11, 2013  
Wt: 8 lbs. 3 oz.  
Parents: LeeAnn Parisi and Michael Brandon  
Livingston  
Female

Micah Wynter Steinke  
Born Dec. 20, 2013  
Wt: 6 lbs. 15 oz  
Length: 19.5 inches  
Parents: Kristyn Swanson and Joel Steinke  
Livingston  
Male

Preston John White  
Born Dec. 21, 2013  
Wt: 7 lbs. 15 oz  
Length: 18.5 inches  
Parents: Susan and Seth White  
Livingston  
Male

Kathryn Piper Noel Lannen  
Born Dec. 22, 2013  
Wt: 7 lbs. 14 oz  
Length: 19 inches  
Parents: Jennifer and Shawn Lannen  
Big Timber  
Female

Neeya Rosenova Gray  
Born Dec. 31, 2013  
Wt: 7 lbs  
Length: 18 inches  
Parents: Nadia and Lance Gray  
Livingston  
Female

Jak Wyatt Stokke  
Born January 3, 2014  
Wt: 8 lbs. 5 oz  
Length: 19 inches  
Parents: Heather and Steve Stokke  
Livingston  
Male

Tannah Rose Carver  
Born January 4, 2014  
Wt: 5 lbs. 12 oz  
Length: 19 inches  
Parents: Megan and Tony Carver  
White Sulphur Springs  
Female

Cassidy Brynn McKnight  
Born January 4, 2014  
Wt: 8 lbs  
Length: 20 inches  
Parents: Shayla and Doug McKnight  
Livingston  
Female

Wyatt Mitchell Sukhbir  
Born Jan. 15, 2014  
Wt: 7 lbs 9 oz  
Length: 21 inches  
Parents: Brittany and Kyle Sukhbir  
Livingston  
Male

Lily Winter McCormack  
Born Jan. 17, 2014  
Wt: 6 lbs. 12 oz  
Length: 19.5 inches  
Parents: Kristin Saccente and Cory McCormack  
Livingston  
Female

Brynn Faith Shepardson  
Born January 23, 2014  
Wt: 6 lbs 5 oz  
Length: 19 inches  
Parents: Jeni and Chris Shepardson  
Livingston  
Female

Jonathan Martin Fawcett  
Born February 1, 2014  
Wt: 6 lbs 1 oz  
Length: 18.5 inches  
Parents: Tawnny Cooper and Nathan Fawcett  
Livingston  
Male

Kitai William Alexander  
Born February 2, 2014  
Wt: 8 lbs 13 oz  
Length: 19.5 inches  
Parents: Kitini Diprizio and Cody Alexander  
Big Timber  
Male

Cheyenne Mae Rose Butterfield  
Born Feb. 27, 2014  
Wt: 9 lbs  
Length: 20.5 inches  
Parent: Lindsey Butterfield  
Livingston  
Female
<table>
<thead>
<tr>
<th>Name</th>
<th>Born</th>
<th>Wt</th>
<th>Length</th>
<th>Parents</th>
<th>Gender</th>
<th>Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>Colter Allen Bean</td>
<td>April 12, 2014</td>
<td>8 lbs 14 oz</td>
<td>20.25 inches</td>
<td>Kayla Kleppen and Jason Bean</td>
<td>Male</td>
<td>Bozeman</td>
</tr>
<tr>
<td>Luke William Malloy</td>
<td>April 13, 2014</td>
<td>6 lbs 6 oz</td>
<td>19 inches</td>
<td>Jenny and Brad Malloy</td>
<td>Male</td>
<td>Livingston</td>
</tr>
<tr>
<td>Morgan Elizabeth Hatch</td>
<td>April 15, 2014</td>
<td>7 lbs 13 oz</td>
<td>20.5 inches</td>
<td>Jessica and Jerob Hatch</td>
<td>Female</td>
<td>Livingston</td>
</tr>
<tr>
<td>Lucy Diane Miller</td>
<td>April 8, 2014</td>
<td>8 lbs 1 oz</td>
<td>21 inches</td>
<td>Alyssa and Joe Miller</td>
<td>Female</td>
<td>Livingston</td>
</tr>
<tr>
<td>Sawyer Skaggs</td>
<td>March 16, 2014</td>
<td>7 lbs 13 oz</td>
<td>19 inches</td>
<td>Maggie and Mike Skaggs</td>
<td>Female</td>
<td>Livingston</td>
</tr>
<tr>
<td>Lucy Jane Marie Tecca</td>
<td>April 16, 2014</td>
<td>8 lbs 4 oz</td>
<td>21.5 inches</td>
<td>Cena Tecca</td>
<td>Female</td>
<td>Livingston</td>
</tr>
<tr>
<td>Astra Luna Denham</td>
<td>March 22, 2014</td>
<td>6 lbs 14 oz</td>
<td>18.5 inches</td>
<td>Alyssa Doran and Mike Denham</td>
<td>Female</td>
<td>Livingston</td>
</tr>
<tr>
<td>Lincoln Dwayne Baker</td>
<td>April 16, 2014</td>
<td>5 lbs 11 oz</td>
<td>19 inches</td>
<td>Margaret and Cody Baker</td>
<td>Male</td>
<td>Livingston</td>
</tr>
<tr>
<td>Georgia Ann Baker</td>
<td>April 16, 2014</td>
<td>5 lbs 14 oz</td>
<td>19 inches</td>
<td>Margaret and Cody Baker</td>
<td>Female</td>
<td>Livingston</td>
</tr>
<tr>
<td>Rocco Orion Stahler</td>
<td>March 2, 2014</td>
<td>10 lbs</td>
<td>21.5 inches</td>
<td>Erin and Daniel Stahler</td>
<td>Male</td>
<td>Gardiner</td>
</tr>
<tr>
<td>Whinter Jade Moss Gibson</td>
<td>March 14, 2014</td>
<td>6 lbs</td>
<td>19 inches</td>
<td>Sharlizha Moss and Steve Gibson</td>
<td>Female</td>
<td>Livingston</td>
</tr>
<tr>
<td>Weston Clay McDonald</td>
<td>March 28, 2014</td>
<td>7 lbs 11 oz</td>
<td>19 inches</td>
<td>Lindsay and Casey McDonald</td>
<td>Male</td>
<td>Melville</td>
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<tr>
<td>Vivienne Astrid Marx</td>
<td>April 9, 2014</td>
<td>8 lbs 11 oz</td>
<td>21.5 inches</td>
<td>Johanna and Mike Marx</td>
<td>Female</td>
<td>Belgrade</td>
</tr>
<tr>
<td>Lucas Gregory Robert Hampson</td>
<td>March 13, 2014</td>
<td>8 lbs 9 oz</td>
<td>21 inches</td>
<td>Britney and Benjamin Hampson</td>
<td>Male</td>
<td>Livingston</td>
</tr>
<tr>
<td>Braden Thomas Lookhart</td>
<td>March 24, 2014</td>
<td>7 lbs</td>
<td>20.5 inches</td>
<td>Sara and Kris Lookhart</td>
<td>Male</td>
<td>Clyde Park</td>
</tr>
<tr>
<td>Georgia Ann Baker</td>
<td>April 16, 2014</td>
<td>5 lbs 14 oz</td>
<td>19 inches</td>
<td>Margaret and Cody Baker</td>
<td>Female</td>
<td>Livingston</td>
</tr>
<tr>
<td>Lucy Jane Marie Tecca</td>
<td>April 16, 2014</td>
<td>8 lbs 4 oz</td>
<td>21.5 inches</td>
<td>Cena Tecca</td>
<td>Female</td>
<td>Livingston</td>
</tr>
</tbody>
</table>
Kinsley Renae Juvan
Born: May 11, 2014
Wt: 7lbs 15oz
Length: 20.5 inches
Parents: Ericka and Dustin Juvan
Livingston
Female

Nels Austin Kelly Swandal
Born: May 19, 2014
Wt: 7lbs
Length: 20 inches
Parent: Rebecca Swandal
Livingston
Male

Samuel Anthony Kaufman
Born: May 20, 2014
Wt: 7lbs 8oz
Length: 21 inches
Parents: Falisha and Brad Kaufman
Livingston
Male

Easton Christopher Waldron
Born: May 23, 2014
Wt: 7lbs 4oz
Length: 20.5 inches
Parents: Katie and Corey Waldron
Livingston
Male

Asher Thomas Skoog
Born: May 24, 2014
Wt: 7lbs 2oz
Length: 19.5 inches
Parents: Stephanie and Eric Skoog
Bozeman
Male

Adalynn Rae Adams
Born: May 26, 2014
Wt: 7lbs 6oz
Length: 19 inches
Parents: Christian and Cody Adams
Bozeman
Female

Brooks Dean Tomlinson
Born: May 27, 2014
Wt: 8lbs 10oz
Length: 21 inches
Parents: Anne Indreland and Schyler Tomlinson
Big Timber
Male

Callen Isaac Kling
Born: May 7, 2014
Wt: 4lbs 12oz
Length: 18.5 inches
Parents: Carrie and Aron Kling
Livingston
Male

Ammon Thatcher Layton Melin
Born: May 10, 2014
Wt: 7lbs 14oz
Length: 20 inches
Parents: Jamie and Richard Melin
Livingston
Male

Grace Merideth
Born: May 28, 2014
Wt: 7lbs 10oz
Length: 20.5 inches
Parents: Allison and Josh Merideth
Livingston
Female

Providers:
Dr. Lindsay Carlson
Dr. Scott Coleman
Dr. Denise Helin
Peggy Scanson, WHNP
Dr. Genevieve Reid

OB Staff:
Mary Boyd, RN
Melissa Brunelle, RN
Marla Dow, RN
Katie Haeussler, RN
Theresa Hollowell, RN
Ruth Kincaid, RN
Mary Morris, RN
Sarah Scaff, RN

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Topping Out Ceremony

On Wednesday, June 25th, Livingston HealthCare celebrated an important milestone in the construction of the new hospital & clinic facility—the raising of the last and highest steel beam of the structure. Over 200 community members and employees came out to join in the celebration, sign the beam before it was raised, and enjoy a BBQ lunch served by LHC’s Food and Nutrition Services. “I want you all to remember that the sole purpose of this building we are celebrating today is to provide quality healthcare to this community for many years to come,” explained Dr. Douglas Wadle, Livingston HealthCare Physician and Board Member. The event concluded with site tours allowing attendees to walk through the building and learn about its features. The new 125,000 square foot building will feature breathtaking views of the surrounding mountain ranges, lots of natural light, private patient rooms with private baths, large state-of-the-art operating rooms, and the option for expansion to accommodate for future growth.

As we build, we are also tracking the economic impact to Livingston and Park County.

As of June, over $1,200,000 has been spent in Livingston on local:
- subcontractors
- stores
- suppliers
- wages
- hotels
- gas stations

In addition, there has been a minimum of 14 Park County Residents working on the site each month since December 2013.

Level 1 Floor Plans

The first floor features a large clinic area that combines services currently being offered at the Clinics on River Drive and West Crawford. The emergency room has a private entrance and increases the number of trauma and emergency exam rooms.

Level 2 Floor Plans

The second floor features 25 private patient rooms, each with a private bathroom. The second floor also has two operating rooms that are 50% bigger than the current operating rooms to accommodate state-of-the-art equipment and more complex procedures.

Lobby & Atrium Features

- Centralized patient navigation and registration
- Two-story atrium
- Designated space for local art
- Natural light
- Fireplace
As each steel beam for the new facility is positioned into place, the vision of a new Livingston HealthCare comes closer to reality. Many years of planning and effort have gone into this project in order to best serve the community through quality healthcare. The top priority of Livingston HealthCare will always be to provide the highest quality care and service to each and every patient and the design of the new facility will help us deliver on that promise. Design of the new facility focused on the following principles:

- Safety
- Clinical excellence
- Patient experience – healing environment
- Staff and physician experience – supportive workflow
- Care delivered in a team atmosphere
- Strategic innovation and growth and
- Stewardship

Please join us in celebrating the transition to the new Livingston HealthCare. Until the first patient is seen in late 2015, we will celebrate major construction milestones and progress along the way. We will be holding facility tours soon. This is a once in a lifetime opportunity and since this is YOUR hospital and clinic, we would like to celebrate every step of the way with you.

I appreciate hearing your feedback and questions, please do not hesitate to contact me.

Sincerely,

Letter From Bren Lowe
CHIEF EXECUTIVE OFFICER

New Hospital and Clinic Facility Features:

- 125,000 square feet (40,000 more than current facilities).
- Two larger and more technically advanced operating rooms, plus an endoscopy room.
- Private pre-and post-surgery patient areas (instead of curtained-off).
- Larger Oncology Department offering private and open treatment areas.
- New state-of-the-art kitchen and dining area including an outdoor patio.
- Designed to accommodate future expansion when needed.
- Larger Multispecialty Provider Clinic, allowing for more visiting specialists in Livingston.
- Family-centered birthing and post-partum labor & delivery rooms.

Patient Room Features

- 25 private rooms with private baths
- Designated caregiver, patient, and family zones
- Patient lift systems for fall-prevention
No One Dies Alone

At Livingston HealthCare, we believe it is unlikely that any human being would ever choose to die alone. Sometimes, however, circumstances are such that a person has no family or close friends remaining or nearby. For these reasons and others, Livingston HealthCare’s Hospice Department has implemented the NODA program. NODA, which stands for No One Dies Alone, is a national, volunteer-centered program started by Sandra Clarke, CCRN, at PeaceHealth in Eugene, OR in 2001. Its mission is to provide companionship and support for dying individuals so that no one dies alone.

Following NODA criteria, a staff nurse, doctor or chaplain will initiate a volunteer response if a patient is expected to die within 48 to 72 hours and there are no friends or family available to stay with them. Volunteers are then scheduled in minimum of two hour shifts to stay with the patient at all times to ensure they are not alone.

Because of the amount of tourists visiting Park County, Livingston HealthCare’s NODA program has also chosen to extend volunteer companionship to patients who have been through a traumatic event and don’t have loved ones close by.

To become a NODA volunteer please contact the Livingston HealthCare Hospice Department at 406-823-6430.

Sleep Studies at Livingston HealthCare

Sleep problems and disorders are a common medical problem affecting millions of Americans. At the Livingston HealthCare Sleep Center, accredited by the American Academy of Sleep Medicine, we use the latest medical techniques to assess your sleep and help you get the rest you need. The Sleep Center is set-up in a residential home to provide patients with the most comfortable and quiet study experience. We currently have three Billings Clinic Sleep Specialist Doctors who see patients in Livingston and assess sleep studies that are conducted at our Sleep Center.

If you have questions or concerns about your sleep behaviors you can schedule an appointment with a Livingston HealthCare Provider by calling 406-222-0800. A referral from your Primary Care Physician is required to be scheduled for a Sleep Study.

TRUE OR FALSE SLEEP QUIZ

FIGURE 1

Adults spend more time in the dream stage of sleep than infants do.

False. Infants spend almost half of their sleep time in the REM (rapid-eye movement) stage of sleep; while adults spend only 20 percent of sleep in REM. REM sleep is characterized by shallow, rapid breathing and jerky eye movements behind closed lids. REM sleep stimulates areas of the brain involved in learning and memory. Most, but not all, dreaming occurs during REM sleep.

People who don’t get enough sleep are at risk for putting on extra weight.

True. People who don’t get enough sleep are more likely to become overweight or obese than those who get enough rest. Lack of sleep may cause people to crave foods high in calories and carbohydrates because hormones released during sleep affect metabolism—how the body uses energy. Insufficient sleep may also increase a person’s risk for other health problems, such as diabetes, heart disease, high blood pressure, and depression.

Snoring may be a sign of a sleep disorder.

True. Not everyone who snores has a sleep disorder, but snoring can be a sign of sleep apnea, a dangerous condition that can be life-threatening. Sleep apnea causes people to stop breathing during sleep. Signs of the disorder include loud snoring, obesity, and excessive daytime sleepiness. Treatment for sleep apnea may include weight loss, change in sleep position, surgery, or the use of special devices to help keep the airway open during sleep.

It doesn’t matter what time of day you sleep, as long as you get sufficient sleep.

False. People have a natural “biological clock” dictated by circadian rhythms, regular biological changes in response to stimulus like sunlight and hormones. These cues make us naturally drowsy between midnight and 7 a.m. and between 1 p.m. and 4 p.m. For this reason, night shift workers often struggle to sleep during the day. They also have an increased risk of heart disease, digestive disorders, infertility, and emotional problems that may be caused, at least in part, by inadequate sleep.

Exercising right before bed tires you out and helps you fall asleep faster.

False. Daily exercise may help improve sleep—but exercising too close to bedtime can make sleeping difficult. Exercise raises body temperature, which interferes with the body’s ability to cool, a natural precursor to falling asleep. Getting regular exercise—at least 30 minutes a day—does make it easier to fall asleep overall. Just try to complete your workout at least five hours before bedtime.
PATIENT PROFILE:
Charlie Vermillion

As a parent there is always a mix of excitement and nervousness before stepping into a parent-teacher conference. You know your child, you want the best for them, you want them to succeed in school, and naturally you want to hear that they are succeeding. Lynn Donaldson-Vermillion was met with one of the messages you don't want to hear from a teacher, ‘We think your son might have ADHD.’ Lynn, her son, and his teacher had a great relationship. In fact he adored his teacher, but his trouble focusing was cause for concern.

Her son, Charlie, is intelligent, well adapted, and outgoing. His experience in kindergarten was wonderful, but when it came to 1st grade, some of the expectations of the classroom were not being met. “It wasn’t that he couldn’t do the work, or that he was being defiant, he just had a hard time focusing, staying on task, and would sometimes become bored with the material,” said Lynn. Plus the size of his classroom was quite a bit larger than kindergarten, and along with that came more distractions.

Lynn and her husband Dan worried that diving right in to traditional treatment options might be jumping the gun. They met with school administrators, counselors, and his teacher. When he got to 2nd grade they helped select a class that they thought might be highly structured and provide an environment that he could focus in, but his teacher had the same concerns. So, they made an appointment with Pediatric Nurse Practitioner Paula Coleman at Livingston HealthCare. “We really didn’t want to put Charlie on medication, but we needed some guidance,” his mother said.

Thankfully for Lynn, Paula took a conservative approach, noting that sometimes these things are just phases, or behaviors that can be adapted with some help at school and at home. Paula then recommended that Charlie try Occupational Therapy. His school counselor agreed. “Most of us didn’t even have a clear picture of what Occupational Therapy is, and had never heard of it being used to treat ADHD,” Lynn said, “but it sounded better than putting him on medication at such a young age.”

Carrie Brewster, the Occupational Therapist (OT) at Livingston HealthCare who worked with Charlie said, “Occupational Therapists work well with kids who have a diagnosis of attention deficit-hyperactivity disorder (ADHD) because we have a special skill set to assess how the environment, social relationships, as well as the physiological and neurological makeup of the child is impacting the performance of age appropriate tasks. We then develop interventions to address the factors that are impacting the child’s ability to self-regulate. Charlie was an awesome child to work with and we were able to find solutions fairly quickly.”

Carrie began attending OT sessions with Carrie in September of 2013. It began with a series of evaluations including pattern tests, to see if he could focus and remember certain patterns in different orientations. They tested whether he was easily distracted by background noise like train whistles, clocks, and other people, whether he was sensitive to things like sugar, and how he responded to caffeine, as a marker of whether stimulant medications would even be a good fit.

Carrie also employed the use of a “wiggle” seat. After noticing that Charlie wiggled a lot when trying to concentrate on a task while sitting down she brought in a yoga ball for him to sit on. This turned out to be a huge aid in Charlie’s concentration. His lower half was free to wiggle and move while his hands and mind could focus at his desk.

Then they were able to get a wiggle seat at school, and Carrie and Charlie’s parents worked with his teacher and the Occupational Therapist at the school to help control other behavioral factors in his life—such as not having rushed mornings, getting adequate sleep, and maintaining a healthy diet. He was also taught to use signals instead of interrupting people, and to read aloud at home for longer periods of time than silent reading to help with reading retention.

In addition, they had Charlie play memory-matching games, and rewarded some of his more tedious work with activities or rewards that interested him so that he had an end goal in mind to help maintain his concentration.

In as little as three months everyone involved in Charlie’s life saw a huge difference. His teacher, Carrie, Lynn and Dan, and even his P.E. teacher all commented that he was a different kid. He even scored 100% on his rigorous 23-page reading comprehension test.

Charlie’s parents were ecstatic. After those three months he was able to transition out of Occupational Therapy and continue to employ the behavioral strategies they’d worked on. “I’m so happy we didn’t just jump right in and abandon the alternatives. Through observation, asking questions, and testing we were able to find working strategies instead of using medication to fix the problem,” and it worked,” said Charlie’s Mom.
Thank you to the generous donors who made contributions and pledges to the Livingston HealthCare Foundation from October 1, 2013 to May 31, 2014. Your support is essential to the long-term stability and growth of quality, local healthcare in Park County and the surrounding area.

We have made every effort to ensure the accuracy of this list. However, if we have made an error or omission please contact us so that we can make it right. Livingston HealthCare Foundation, 406-823-6648.

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Jerry and Cindy Good

Jerry and Cindy Good

Jerry and Cindy Good

Jerry and Cindy Good

Marcia Adams
Mike and Kathleen Donahue
Livingston HealthCare has the experience and expertise to support you and your family through a cancer diagnosis. Working in conjunction with Billings Clinic oncologists, our primary care physicians are able to provide care and treatment to cancer patients locally. Outpatient chemotherapy treatment appointments are offered Monday through Friday at Livingston HealthCare. Call 406-222-3541 for information about our cancer services.